

ADHS/CRS Yuma Regional Medical Center

Administrative Review Contract Year Ending 2007



July 1, 2006 through March 31, 2007

Conducted by the Arizona Department of Health Services
Office for Children with Special Health Care Needs
Children's Rehabilitative Services Administration

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Fact Sheet

ARIZONA DEPARTMENT OF HEALTH SERVICES

OFFICE FOR CHILDREN WITH SPECIAL HEALTH CARE NEEDS

CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION (CRSA)

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Fact Sheet

CRS YUMA REVIEW TEAM:

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Executive Summary

Children's Rehabilitative Services Administration (CRSA) was created to improve children's quality of life by providing family-centered medical treatment, rehabilitation, and related support services to enrolled individuals who have certain medical, handicapping, or potentially handicapping conditions. In 1997, CRSA and the Office for Children with Special Health Care Needs (OCSHCN) were merged, permitting a coordinated and comprehensive approach to the planning, implementation and evaluation of programs and policies. Today CRSA serves approximately 20,000 children statewide.

The primary objectives of ADHS/CRSA Administrative Review are to:

- Determine if the REGIONAL CONTRACTOR satisfactorily meets CRSA/AHCCCS' requirements as specified in the ADHS/CRS Contract, CRSA/AHCCCS policies, Balanced Budget Act of 1997 (BBA) and the Arizona Administrative Code (AAC).
- Perform oversight of the REGIONAL CONTRACTOR as required by the Centers for Medicare and Medicaid Services in accordance with AHCCCS' 1115 waiver.
- Increase knowledge of the REGIONAL CONTRACTOR'S operational and financial procedures.
- Provide technical assistance to the REGIONAL CONTRACTOR.
- Identify areas where improvements can be made.
- Identify areas of noteworthy performance and accomplishments.
- Review progress in implementing recommendations made during prior Administrative Reviews.
- Determine if the REGIONAL CONTRACTOR complies with its own policies.
- Evaluate the effectiveness of those policies and procedures.

The ADHS/CRSA Review Team included employees of the CRSA Divisions of Compliance; Quality Management; Medical Management; Clinical Programs; Consumer Rights; Cultural Competency and Finance.

Children's Rehabilitative Services is located within the Yuma Regional Medical Center's Children Health Services. Children's Rehabilitative Services (CRS) of Yuma serves approximately 1000 members to improve the quality of life for children by providing family-centered medical treatment, rehabilitation, and related support services to enrolled individuals who have certain medical, handicapping, or potentially handicapping conditions.

The Review Team completed an extensive document review and conducted interviews with appropriate CRS Yuma personnel on April 24 – 25, 2007. CRSA provided Children's Rehabilitative Services (CRS) of Yuma with the standards approximately two weeks prior to the onsite review. CRS Yuma provided documents to CRSA prior to and during the onsite review. CRS Yuma staff was very accommodating and their medical files were well organized and maintained.

CRS Yuma conducted a cardiac clinic during the onsite review and it was noted that it had provided excellent coordination of care services to a member who required highly specialized out of state care.

A brief summary and performance assessment of each program area follows:

Claims Systems: CRS Yuma's claims processing staff have done a great job in bringing their policies and procedures into alignment with the changes implemented in Chapter 50 of the Regional Contractor's Policy and Procedure Manual (RCPPM) this past year. This is evident in the information provided within each of the required reports.

Cultural Competency: CRS Yuma has performed well on maintaining a cultural competency program and providing services in line with the CLAS standards. It provides many materials and resources to educate members in Spanish. The Clinic displays signage informing members of the availability of interpretation and translation services placed at the entrance of the building and other prominent locations. Dual head set telephones are in every examination room for use by the medical staff when a member needs interpretation services and their on site interpreter is not available. The Clinic also has specific policies to inform employees on the how to provide language services, how to use an interpreter and become an interpreter.

Financial Management: CRS Yuma has policy and procedures as well as processes that reflect the requirements for business continuity, claims and encounter processing including coordination of benefits and third party liability. CRS Yuma has struggled consistently with submitting complete and/or accurate financial statements. A corrective action plan

requested by CRSA for the CRS Yuma financial statements has been submitted by Yuma. CRSA is currently working with CRS Yuma to refine the corrective action plan.

General Administration: CRS Yuma has a Policy Committee which meets bi-weekly to review CRSA policy revisions and to identify any needed CRS Yuma policy revisions. CRS Yuma operates under the Yuma Regional Medical Center's Corporate Compliance Program as a subdivision of the hospital. Although this is a good arrangement, the program can improve by conducting program specific audits of CRS Yuma, having the CRS Corporate Compliance Officer (CO) attend the YRMC Corporate Compliance Committee meetings and adding policy language that would make it clear that the YCRS CO can report suspected fraud and program abuse directly to AHCCCS-OPI and ADHS. All areas reviewed this year demonstrated partial to full compliance. CRS Yuma has developed standardized policies.

Grievance Systems: CRS Yuma has policies and procedures in place to address requirements of the Grievance System. CRS Yuma has received training and technical assistance on the Grievance System procedures and requirements from CRSA. CRS Yuma did not have any prior-authorized service denials, appeals or claim disputes during the review period (July 1, 2006 to March 31, 2007).

Medical Management: CRS Yuma has improved its performance in all areas of Medical Management in regards to compliance with ADHS/ CRSA and AHCCCS standards. It is recognized that new management is in place at CRS Yuma which appears to be very receptive of feedback from ADHS/CRSA procedures.

Member Services: CRS Yuma has a colorful and friendly waiting room for their members. CRS Yuma should consider continuing to utilize the comprehensive Psychosocial Assessment Profile to document distribution of New Member Orientation Packet, Member Handbook, listing of providers and their languages spoken, and the notification of Advance Directives.

Network Sufficiency: CRS Yuma has demonstrated compliance in many areas of provider network management, including maintaining a directory of contracted providers and physicians and specialty clinic schedule, tracking current and anticipated enrollment, estimation of current and anticipated utilization of services, arrangement of second opinions at no cost to members, and compliance with CRSA recommended pharmacy hours. CRS Yuma has problems with frequent clinic cancellation by their provider's which needs to be corrected for effective network management.

Quality Management: The CRS Yuma Clinic is a Joint Commission accredited organization. They received their accreditation as of March 11, 2006, therefore, receiving deemed status for appropriate staffing, medical record review, and credentialing/ re-credentialing. CRS Yuma has made their providers aware of the CRSA peer review process through their provider manual. Although CRS Yuma has a quality of care/service issue process it needs to improve upon communicating the resolution of concerns to the grievant.

The OCSHCN/CRS Administrator and her staff express appreciation to the CRS Yuma Director and her staff for their cooperation and assistance throughout the Administrative Review.

Findings

Rating Definitions

CRSA usually rates the REGIONAL CONTRACTOR based on the percentage of the findings that meet each standard. When a different methodology is used, CRSA notes it in the standard. Compliance is determined as follows:

Full Compliance: REGIONAL CONTRACTOR is 90 -100% in compliance with the standard or sub-standard findings.

Substantial Compliance: REGIONAL CONTRACTOR is 75 - 89% in compliance with the standard or sub-standard findings.

Partial Compliance: REGIONAL CONTRACTOR is 50 - 74% in compliance with the standard or sub-standard findings.

Non-Compliance: REGIONAL CONTRACTOR is 0 - 49% in compliance with the standard or sub-standard findings.

Not Rated: This standard does apply to REGIONAL CONTRACTOR; however, it will not be scored during this review period.

Recommendation Definitions

REGIONAL CONTRACTOR must....This indicates a critical non-compliance with the CRSA contract that the Regional Contractor must correct as soon as possible.

REGIONAL CONTRACTOR should consider....This is a suggestion by the Review Team to improve operations of CRSA, although not directly related to contract compliance.

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
STANDARDS SUMMARY**

CLAIMS SYSTEM

STANDARDS	FINDINGS	RECOMMENDATIONS
CS1	FC	.
CS2	FC	
CS3	FC	
CS4	SC	CRS Yuma must ensure consistent and timely payments are met according to contract requirements.
CS5	FC	
CS6	FC	
CS7	FC	
CS8	FC	
CS9	FC	
CS10	FC	
CS11	FC	
CS12	FC	
CS13	FC	

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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STANDARDS SUMMARY**

CS14	FC	
CS14A	FC	
CS15	NC	CRS Yuma must provide evidence of receiving and paying at least 25% of all claims electronically (excluding claims processed by PBM).
CS16	FC	
CS17	FC	

**FC = Full Compliance
Applicable**

SC = Substantial Compliance

PC = Partial Compliance

NC = Non-Compliance

NA = Not

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
STANDARDS SUMMARY**

CULTURAL COMPETENCY

STANDARDS	FINDINGS	RECOMMENDATIONS
CC1	FC	
CC2	SC	CRS Yuma must maintain agenda, sign in sheets and other documents to ensure its staff attends cultural competency sessions.
CC3	FC	
CC4	FC	.
CC5	FC	
CC6	FC	

FC = Full Compliance
Applicable

SC = Substantial Compliance

PC = Partial Compliance

NC = Non-Compliance

NA = Not

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
STANDARDS SUMMARY**

FINANCIAL MANAGEMENT

STANDARDS	FINDINGS	RECOMMENDATIONS
FM1	NC	CRS Yuma must provide complete, timely and accurate financial records.
FM2	FC	
FM3	FC	
FM4	FC	.
FM5	FC	
TPL1	FC	
TPL2	FC	
TPL3	FC	
TPL4	FC	

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
STANDARDS SUMMARY**

GENERAL ADMINISTRATION

STANDARDS	FINDINGS	RECOMMENDATIONS
GA1	FC	
GA2	FC	
GA3	PC	CRS Yuma must notify providers of policy changes as they occur and maintain documentation that verifies notification.
GA4	PC	CRS Yuma must disseminate Provider Manual updates and changes to its providers and maintain documentation to verify that dissemination.
GA5	SC	CRS Yuma or YRMC must conduct audits or reviews that would be adequate to detect fraud and program abuse within the CRS Yuma Clinic or any of the Clinic's contractors. CRS Yuma must ensure that their designated Corporate Compliance Officer attends and participates in the Yuma RMC Corporate Compliance Committee meetings.

**FC = Full Compliance
Applicable**

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NA = Not

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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STANDARDS SUMMARY**

GRIEVANCE SERVICES

STANDARDS	FINDINGS	RECOMMENDATIONS
GS1	PC	CRS Yuma must provide Notices of Action and/or Notices of Extension Template Letters, in English or Spanish as appropriate.
GS2	NR	
GS3	NR	
GS4	NR	
GS4A	NR	
GS4B	NR	
GS5	NR	
GS6	FC	
GS7	FC	
GS8	FC	
GS9	FC	
GS10	FC	
GS11	FC	

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STANDARDS SUMMARY**

GS12	FC	
GS13	FC	
GS14	NR	
GS15	NR	
GS16	NR	
GS17	NR	
GS18	FC	
GS19	NR	
GS20	NR	
GS21	NR	
GS22	NR	
GS23	FC	
GS24	NR	

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Applicable**

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NA = Not

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
STANDARDS SUMMARY**

MEDICAL MANAGEMENT

STANDARDS	FINDINGS	RECOMMENDATIONS
MM1	SC	CRS Yuma must ensure full implementation of all developed policies. CRS Yuma shall conduct MM/UM/QM meetings on a regularly scheduled basis.
MM2	PC	CRS Yuma must conduct MM/UM/QM meetings on a regularly scheduled basis, including sign-in sheet, agenda and minutes with action items for follow-up. CRS Yuma should consider regular utilization data review, identify trends, implement interventions, analyze the actions taken and make changes to the course of action if necessary.
MM3	FC	
MM4	FC	
MM5	FC	
MM6	PC	CRS Yuma must arrange IRR training and testing for all staff involved in medical necessity determination, including the Medical Director. CRS Yuma must conduct regular checks for consistent application of review criterion for IRR and document the findings.
MM6A	PC	CRS Yuma must arrange structured IRR training and testing for all staff involved in medical necessity determination, including the Medical Director on annual basis. CRS Yuma must conduct regular checks for consistent application of review criterion for IRR and document the findings.
MM7	FC	

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STANDARDS SUMMARY**

STANDARDS	FINDINGS	RECOMMENDATIONS
MM8	FC	
MM9	SC	CRS Yuma must develop a written plan to implement corrective action when established timelines are not met.
MM9-A	FC	
MM10	FC	

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Applicable**

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PC = Partial Compliance

NC = Non-Compliance

NA = Not

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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STANDARDS SUMMARY**

MEMBER SERVICES

STANDARDS	FINDINGS	RECOMMENDATIONS
MS1	FC	
MS2	FC	
MS3	FC	
MS4	FC	
MS5	FC	

**FC = Full Compliance
Applicable**

SC = Substantial Compliance

PC = Partial Compliance

NC = Non-Compliance

NA = Not

**ADHS/OCSHCN
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STANDARDS SUMMARY**

NETWORK SUFFICIENCY

STANDARDS	FINDINGS	RECOMMENDATIONS
NS1	NC	CRS Yuma must ensure that a clinic cancellation by providers does not affect the regularly scheduled clinic for that specialty. CRS Yuma must revise their Provider Manual and require adequate time for clinic cancellations from providers.
NS2	FC	
NS3	FC	
NS4	FC	
NS5	FC	
NS6	FC	

FC = Full Compliance FC SC = Substantial Compliance PC = Partial Compliance NC = Non-Compliance NA = Not Applicable

**ADHS/OCSHCN
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STANDARDS SUMMARY**

QUALITY MANAGEMENT

STANDARDS	FINDINGS	RECOMMENDATIONS
QM1	FC	
QM2	FC	
QM3	FC	
QM4	NA	
QM5	FC	
QM6	SC	CRS Yuma must send acknowledgement and closure letters to members or their guardians who express a potential quality of care concern. CRS Yuma must list the "provider/entity" for each QOC and non-QOC case.
QM7	FC	
QM8	FC	
QM9	FC	
QM10	FC	
QM11	PC	CRS Yuma must ensure eligibility denial notifications are sent to the referring physician and health plan within 5 working days of denial determination.

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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STANDARDS SUMMARY**

STANDARDS	FINDINGS	RECOMMENDATIONS
QM12	FC	

FC = Full Compliance
Applicable

SC = Substantial Compliance

PC = Partial Compliance

NC = Non-Compliance

NA = Not

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Claims Systems

ADHS REVIEW TEAM:

**Cynthia Layne, Chief Financial Officer
Jerri Gray, HIPAA/Data Manager
Cheryl Prescott, CRS Finance Manager**

CONTRACTOR STAFF:

**Luz Valle, Business Operations Supervisor
Pam Dallabetta, Administrative Director**

DATE OF REVIEW:

April 24 - 25, 2007

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Claims Systems

Standard:

CS 1

REGIONAL CONTRACTOR has at least monthly aged claims inventory tracking reports.

Citations: 42 CFR 438.242(a); ADHS/Regional Contractor Contract #HP361008, Task 10

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does have adequate claims inventory tracking reports.

Documents Reviewed:

Monthly Claims Aging Reports Policy; Monthly Claims Inventory Report Policy; Claims Inventory Reports July 2006 through March 2007

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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Claims Systems

Standard:

CS 2

REGIONAL CONTRACTOR has reports to identify aged claims inventory on the last day of the month.

Citations: 42 CFR 438.242(a); ADHS/Regional Contractor Contract #HP361008, Task 10

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does have adequate reports to identify aged claims on the last day of the month.

Documents Reviewed:

Monthly Claims Aging Reports Policy; Monthly Claims Inventory Report Policy; Claims Inventory Reports July 2006 through March 2007

Comments: None

Recommendations: None

**ADHS/OCSHCN
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Claims Systems

Standard:

CS 3

REGIONAL CONTRACTOR has policies and procedures in place regarding the adjudication of 90% of all clean claims within 30 days of receipt and 99% of clean claims within 60 days of receipt.

Citations: 42 CFR 447.45(d); RCPM 50.200(2)

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does have adequate policy and procedures regarding the required adjudication of 90% of clean claims within 30 days from date of receipt and 99% of clean claims within 60 days of date of receipt.

Documents Reviewed:

Monthly Claims Inventory Report Policy; Processing of Facility Claims Policy; Processing of Professional Claims Policy; Surgery Review Policy

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Claims Systems

Standard:

CS 4

REGIONAL CONTRACTOR adjudicates 90% of all clean claims within 30 days of receipt and 99% of clean claims within 60 days of receipt (unless otherwise specified in Regional Contractor contract).

Citations: 42 CFR 447.45(d); RCPDM 50.200(2)

Rating: SUBSTANTIAL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does show evidence of claims adjudicating 90% of all clean claims within 30 days of receipt and 99% of clean claims within 60 days of receipt. (61%)

Documents Reviewed:

Claims Aging Reports – July 2006 through March 2007

Comments:

CRS Yuma met the standard of 90% of all clean claims paid within 30 days of receipt four of the nine months reviewed and met the standard of 99% of clean claims paid within 60 days of receipt seven of the nine months reviewed.

Recommendations:

CRS Yuma must ensure consistent and timely payments of claims are met according to contract.

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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Claims Systems

Standard:

CS 5

REGIONAL CONTRACTOR has policies and procedures on timely identification and recoupment of erroneously paid claims, and on identification of claims which the Contractor is a secondary payor, prior to payment to minimize the need for recoupment.

Citations: 42 CFR 438.242(a); RCPPM 50.200(2)

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does have adequate policy and procedures identifying and recouping erroneously paid claims.

REGIONAL CONTRACTOR does have adequate policy and procedures identifying claims which the Contractor is a secondary payor, prior to payment to minimize the need for recoupment.

Documents Reviewed:

Overpayment/Underpayment Policy; Claims Processing and Payment Policy; Coordination of Benefits and Post Payment Recovery Policy

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Claims Systems

Standard:

CS 6

REGIONAL CONTRACTOR applies the policies and procedures on timely identification and recoupment of erroneously paid claims. REGIONAL CONTRACTOR has a process to identify claims which the Contractor is a secondary payor, prior to payment to minimize the need for recoupment.

Citations: 42 CFR 438.242(a); RCPM 50-200(11)

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does apply the policy and procedures regarding the identification and recoupment of erroneously paid claims.

REGIONAL CONTRACTOR does have a process to identify claims which the Contractor is a secondary payor, prior to payment to minimize the need for recoupment.

REGIONAL CONTRACTOR does reconcile paid claims to the encounters submitted to CRSA to ensure that all paid claims have been encountered.

Documents Reviewed:

Claims Overpayments and Underpayments Log; Overpayment/Underpayment Policy; Claims Processing and Payment Policy; Coordination of Benefits and Post Payment Recovery Policy; Letter reviewing claims reports submitted for quarters ended 9/30/06 and 12/31/06

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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Claims Systems

Standard:

CS 7

REGIONAL CONTRACTOR voids/adjusts the original encounter when a recoupment is made due to the identification of an erroneously paid claim (claim that should have originally been denied) or when a recoupment is made due to incorrect data or processing (e.g., when demographic, Clinical or financial data is changed)

Citations: 42 CFR 438.242(b); ADHS/Regional Contractor Contract #HP361008, Task 10; RCPPI 50-200(11)(C)

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does have adequate policy and procedures describing the adjustment/voided encounter processing when a previously paid encounter is later recouped or voided.

Documents Reviewed:

Claim Overpayment and Underpayment Logs for July 2006 to March 2007; Letter reviewing claims reports submitted for quarters ended 9/30/06 and 12/31/06; Overpayment/Underpayments Policy

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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Claims Systems

Standard:

CS 8

REGIONAL CONTRACTOR has policies and procedures on reprocessing and paying all overturned claims disputes in a manner consistent with the decision within 10 business days of the decision.

Citations: 42 CFR 438.424; RCPPM 50-502

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does have adequate policy and procedures describing the reprocessing and paying of overturned claims disputes, consistent with the decision, within 10 business days of the decision.

Documents Reviewed:

CRS Yuma Provider's Claim Dispute Policy

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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Claims Systems

Standard:

CS 9

The Regional Contractor has a mechanism in place to inform providers of the appropriate place to send claims.

Citation: 42 CFR 438.242

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does have a mechanism in place to inform providers of the appropriate place to send claims.

Documents Reviewed:

CRS Yuma Provider Manual

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Claims Systems

Standard:

CS 10

The Regional Contractor has a quality assurance program that ensures that claims processing personnel are continually monitored to ensure claims are processed to industry standards for accuracy. Claims processing personnel are formally trained to process the CRS claims.

Citations: RCPDM 50-200 (11), (12) (G),(13); ADHS/Regional Contractor Contract #HP361008, Special Terms and Conditions 7(B); AAC R9-22-703, 705

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does have a quality assurance program that ensures that claims processing personnel are continually monitored to ensure claims are processed to industry standards for accuracy.

REGIONAL CONTRACTOR does ensure that its claims processing personnel are trained to process CRS claims.

Documents Reviewed:

CRS Yuma Claims Accuracy Report for July 2006 through March 2007; Monthly Claims Accuracy-Data Integrity Report Policy; Project Plan for Claims Processing Training; Claims Processing Training Log for July 2006 through March 2007

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Claims Systems

Standard:

CS 11

REGIONAL CONTRACTOR submits an accurate and timely Deleted Encounters log.

Citations: CYE 06 ADHS/Regional Contractor Contract #HP361008, Task 10; RCPPM 50-200 (12)(F)

Rating: FULL COMPLIANCE

Findings:

The REGIONAL CONTRACTOR does submit accurate and timely Deleted Encounters log. (100%)

Documents Reviewed:

CRS Yuma Deleted Encounter Report for July 2006 through March 2007

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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Claims Systems

Standard:

CS 12

The REGIONAL CONTRACTOR's remittance advice to providers must contain, at a minimum, adequate description of all denials and adjustments, the reasons for such denials and adjustments, the amount billed, the amount paid, and provider rights for claim dispute.

Citations: AHCCCS Administration Encounter reporting User Manual; RCPPM 50-200 (4)

Rating: FULL COMPLIANCE

Findings:

The REGIONAL CONTRACTOR's remittance advice to providers does contain, at minimum, adequate descriptions of all denials and adjustments, the reasons for such denials and adjustments, the amount billed, the amount paid, and provider rights for claim dispute.

Documents Reviewed:

CRS Yuma Remittance Advice; Processing of Facility Claims Policy

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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Claims Systems

Standard:

CS 13

The REGIONAL CONTRACTOR has a policy or process to notify CRSA of any cumulative recoupment greater than \$50,000 per provider per contract year.

Citations: RCPPM 50-200 (1) (11)

Rating: FULL COMPLIANCE

Findings:

The REGIONAL CONTRACTOR does notify CRSA of any cumulative recoupment greater than \$50,000 per provider per contract year.

Documents Reviewed:

CRS Yuma Recoupment listing by Provider; Claims Overpayments and Underpayments log for July 2006 through March 2007; Overpayments/Underpayments Policy; Claims Processing and Payment Policy

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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Claims Systems

Standard:

CS 14

The REGIONAL CONTRACTOR has a policy or process to request approval from CRSA prior to recouping monies from a provider later than 12 months after the date of original payment on a clean claim.

Citations: RCPPM 50-200 (1)

Rating: FULL COMPLIANCE

Findings:

The REGIONAL CONTRACTOR does have a policy or process to request approval from CRSA prior to recouping monies from a provider later than 12 months after the date of original payment on a clean claim.

Documents Reviewed:

CRS Yuma Overpayments/Underpayments Policy; Claims Processing and Payment Policy

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Claims Systems

Standard:

CS 14A

The REGIONAL CONTRACTOR pays a slow payment penalty on hospital clean claims in accordance with A.R.S. 2903.01. (unless otherwise specified in provider subcontract)

Citations: RCPPM 50-200 (5)(C)

Rating: FULL COMPLIANCE

Findings:

The REGIONAL CONTRACTOR does pay a slow payment penalty on hospital clean claims in accordance with A.R.S. 2903.01. (unless otherwise specified in provider subcontract).

Documents Reviewed:

CRS Yuma Processing of Facility Claims Policy

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Claims Systems

Standard:

CS 15

The REGIONAL CONTRACTOR shows evidence of receiving and paying at least 25% of all claims electronically (excluding claims processed by PBM).

Citations: RCPPM 50-200 (7)(B)

Rating: NON-COMPLIANCE

Findings:

The REGIONAL CONTRACTOR does not show evidence of receiving and paying at least 25% of all claims electronically (excluding claims processed by PBM).

Documents Reviewed:

CRS Yuma Regional Contractor's Processing of Facility Claims Policy

Comments:

CRS Yuma has a policy stating that they are required to be able to accept electronic claims submissions; however, they have not provided documentation to this effect.

Recommendations:

CRS Yuma must provide evidence of receiving and paying at least 25% of all claims electronically (excluding claims processed by PBM).

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Claims Systems

Standard:

CS 16

The REGIONAL CONTRACTOR has a process to audit processing accuracy for both manual and auto adjudicated claims.

Citations: RCPPI 50-200 (11), (12)(G)

Rating: FULL COMPLIANCE

Findings:

The REGIONAL CONTRACTOR does have a process to audit processing accuracy for both manual and auto adjudicated claims.

Documents Reviewed:

CRS Yuma Claims Accuracy Report for July 2006 through March 2007; Monthly Claims Accuracy-Data Integrity Report Policy; Project Plan for Claims Processing Training; Claims Processing Training Log for July 2006 through March 2007

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Claims Systems

Standard:

CS 17

The REGIONAL CONTRACTOR's health information system collects, analyzes, integrates, and reports data on claim disputes and appeals. The REGIONAL CONTRACTOR utilizes data from the claims dispute to adjust operations, as necessary.

Citations: [42 CFR 438.242(a); RCPPM 50-202 (4)]

Rating: **FULL COMPLIANCE**

Findings:

The REGIONAL CONTRACTOR's information system does collect, analyze, integrate, and report data on claim disputes and appeals.

The REGIONAL CONTRACTOR does utilize data from the claims dispute to adjust operations, as necessary.

Documents Reviewed:

CRS Yuma Provider's Claim Dispute Policy and Procedure

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
2007 ADMINISTRATIVE REVIEW TOOL**

Cultural Competency

ADHS REVIEW TEAM: Norma Garcia-Torres, Diversity and Inclusion Administrator
Linda Hamman, Family/Youth Involvement Program Manager

CONTRACTOR STAFF: Sandra Thomas, Compliance Specialist

DATE OF REVIEW: April 24 - 25, 2007

**ADHS/OC SHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
2007 ADMINISTRATIVE REVIEW TOOL**

Cultural Competency

Standard:

CC1

REGIONAL CONTRACTOR maintains a cultural competency program and ensures that its members receive materials and services that are compatible with the members' cultural needs.

Citations: 42 CFR 438.206 (c), Contract #HP361008, RCP PM Chapter 40

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does ensure that its subcontractors maintain a cultural competency program.

REGIONAL CONTRACTOR does ensure that its cultural competency program provides materials and services that are compatible with the member's cultural needs.

REGIONAL CONTRACTOR does periodically assess the cultural and linguistic needs of the population it serves to ensure service capacity meets those needs.

REGIONAL CONTRACTOR does participate in CRSA requirements to promote the delivery of services in a culturally competent manner to all members, including those with limited English proficiency and diverse cultural and ethnic backgrounds.

Documents Reviewed:

- Policy on Cultural Competency date 3-07
- Orientation Checklist includes Cultural Competency packet
- Cultural Competency Guide – "Culturally Competent Patient Care, A Guide for Provider Staff" with attestation signature of provider, given out to each new provider and annually
- Contains cultural section, strategies and approaches, assessing beliefs and values, LEP, deaf and hard of hearing, statement of responsibility to provide services to visually impaired and speech impaired
- List of people certified to interpret – currently one person and 2 others waiting to take courses,
- Attachment A, B, C of the Provider Attestation.
- Medical Files identify need for interpretations services on front of file cover

Comments:

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
2007 ADMINISTRATIVE REVIEW TOOL**

Cultural Competency

The Hospital assesses cultural and linguistic needs at their level and information passed down to CRS Clinic. Staff that is hired is required to take Cultural Competency training prior to actually starting to work at the clinic and or hospital. Included in the "Culturally Competent Patient Care, A Guide for Provider Staff" is an attestation signature from the provider. The Guide is distributed to each new provider and on an annual basis.

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
2007 ADMINISTRATIVE REVIEW TOOL**

Cultural Competency

Standard:

CC2

REGIONAL CONTRACTOR ensures that all staff and volunteers attend training/education sessions on awareness and sensitivity to culture and socioeconomic conditions of the CRS population and CLAS standards.

Citations: 42 CFR 438.10 (c), Contract #HP361008, RCPDM Chapter 40.513.8

Rating: SUBSTANTIAL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does provide or make available cultural competency training/education for its staff or volunteers. (40%)

REGIONAL CONTRACTOR does provide or make available CLAS standards training/education for its staff or volunteers. (40%)

REGIONAL CONTRACTOR does not maintain agenda, sign in sheets and other documents to ensure its staff and volunteers have attended cultural competency sessions and CLAS standards. (20%)

Documents Reviewed:

- List of training provided to employees of Contractors provided by hospital that includes Cultural Competency Training.
- Agenda and sign in sheets of the Limited English Proficiency provided by CRS.
- Cultural Competency Guide – “Culturally Competent Patient Care, A Guide for Provider Staff” with attestation signature of provider, given out to each new provider and annually

Comments: None

Recommendations:

CRS Yuma must ensure that they maintain agenda, sign in sheets and other documents to ensure attendance to cultural competency sessions.

**ADHS/OC SHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
2007 ADMINISTRATIVE REVIEW TOOL**

Cultural Competency

Standard:

CC3

REGIONAL CONTRACTOR ensures that interpretation and translation services are made available to its members and documented in the member's medical record.

Citations: 42 CFR 438.10 (d), Contract #HP361008, RCPDM Chapter 40. 513.2, Chapter 40.513.7

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does notify its members on how to access oral interpretation and translation services.

REGIONAL CONTRACTOR does document in the member's medical record the member's preferred language during the enrollment/intake process.

REGIONAL CONTRACTOR does document in the member's medical record whether oral interpretation services were provided.
__100__% of (10) medical files reviewed contained documentation of interpretation services.

Documents Reviewed:

- Language Line contract with CyraCom.
- Policy for employees on how to use language access services
- Process for translating documents
- Training and policy on how to be an interpreter and steps for designated interpreters
- Incentives for employees that provide interpretation services
- Information packet, Member Handbook
- Observation during the site visit – signage at front door of office and on each door of the examination room when interpreter is required
- Observation during site visit – CyraCom Interpretation phones in each of the examination rooms

Comments: None

Recommendations: None

**ADHS/OC SHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
2007 ADMINISTRATIVE REVIEW TOOL**

Cultural Competency

Standard:

CC4

REGIONAL CONTRACTOR provides language assistance services, and ensures its providers have language assistance services that meet federal and state requirements.

Citations: 42 CFR 438.10 (d), Contract #HP361008, RCPDM Chapter 40. 513.2, Chapter 40.513.7

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does provide languages assistance services that meet federal and state requirements, including bilingual staff and interpreter services,

- at all points of contact;
- at no cost to each CRS member with Limited English Proficiency (LEP);
- in a timely manner;
- during all hours of operation;
- with easily understood patient-related materials; and
- with signage in the languages of the commonly encountered groups and/or groups represented in the service area, conspicuously posted public area such as a facility waiting room.

REGIONAL CONTRACTOR does/does not ensure its providers have language assistance services that meet federal and state requirements, including bilingual staff and interpreter services, (Not Rated):

- at all points of contact;
- at no cost to each CRS member with Limited English Proficiency (LEP);
- in a timely manner;
- during all hours of operation;
- with easily understood patient-related materials; and
- with signage in the languages of the commonly encountered groups and/or groups represented in the service area, conspicuously posted public area such as a facility waiting room.

Documents Reviewed:

- Interpretation and Translation Policy
- Language line contract with CyraCom

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
2007 ADMINISTRATIVE REVIEW TOOL**

Cultural Competency

- Member Handbook
- Information Packet
- Documentation of the one certified interpreter for Clinic
- List of Providers that speak a language other than English
- Process to ensure a persons request for a preferred language and that language is used in further communication with member. Language preference is written in medical record and sign in front of exam room alerting those staff members that the child and family need an interpreter
- Observation during the site visit – signage at front door of office and on each door of examination room when interpreter is required
- Observation during site visit – Cyracom Interpretation phones in each of the examination rooms
- Training and informing providers of the requirement to provide language access services – Process found in Attachment A, B, and C of Provider Attestation.
- Policy on how to access language services to inform employees how to implement language access services

Comments: None

Recommendations: None

**ADHS/OC SHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
2007 ADMINISTRATIVE REVIEW TOOL**

Cultural Competency

Standard:

CC5

REGIONAL CONTRACTOR provides and ensures its providers make both verbal offers and written notices informing CRS members of their right to receive language assistance services in their preferred languages and or alternative format.

Citations: 42 CFR 438.10 (d), Contract #HP361008, RCPDM Chapter 40.513.2

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does provide both verbal offers and written notices informing CRS members of their right to receive language assistance services in their preferred languages and or alternative format.

REGIONAL CONTRACTOR does ensure its providers make verbal offers and written notices informing CRS members of their right to receive language assistance services in their preferred languages and or alternative format, (Not Rated).

Documents Reviewed:

- Member Handbook – in both English and Spanish
- New Member Orientation Packet – in both English and Spanish
- Letters and newsletters that provide information to members – PAC, newsletter in both English and Spanish
- Signage and posting found in front door of clinic and in individual examination rooms where interpreter is required by
- Cultural Competency Guide – “Culturally Competent Patient Care, A Guide for Provider Staff” with attestation signature of provider, given out to each new provider and annually after that
- Policy and or procedures on how to access language services for employees

Comments: None

Recommendations: None

**ADHS/OC SHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
2007 ADMINISTRATIVE REVIEW TOOL**

Cultural Competency

Standard:

CC6

REGIONAL CONTRACTOR ensures the competence of language assistance provided to LEP persons by interpreters and bilingual staff.

Citations: 42 CFR 438.10 (d), Contract #HP361008, RCPDM Chapter 40. 513.2, Chapter 40.513.7

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does ensure the competence of language assistance provided by interpreters and bilingual staff.

REGIONAL CONTRACTOR does ensure that its providers ensure the competence of language assistance provided by interpreters and bilingual staff, (Not Rated).

Documents Reviewed:

- Certification process ensuring the skill level of interpreters and sign language interpreters
- Contract with language line and sign language services contract
- Policy and procedure for accessing language services and how to be an interpreter
- Cultural Competency Guide – “Culturally Competent Patient Care, A Guide for Provider Staff” with attestation signature of provider, given out to each new provider and annually after that

Comments:

The Cultural Competency Guide – “Culturally Competent Patient Care, A Guide for Provider Staff” with attestation signature of provider, given out to each new provider and annually after that, the Regional Contractor.

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Financial Management

ADHS REVIEW TEAM:

**Cynthia Layne, Chief Financial Officer
Jerri Gray, HIPAA/Data Manager
Cheryl Prescott, CRS Finance Manager**

CONTRACTOR STAFF:

**Pam Dallabetta, Administrative Director
Luz Valle, Business Operations Supervisor**

DATE OF REVIEW:

April 24 - 25, 2007

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Financial Management

Standard:

FM 1

REGIONAL CONTRACTOR shall have a system to produce complete, timely and accurate financial records in accordance with contract requirements for financial reporting. Citations: Contract #HP361008

Citations: ADHS/Regional Contractor Contract #HP361008, Task 10

Rating: NON-COMPLIANCE

Findings:

REGIONAL CONTRACTOR does not have a process to ensure its reporting requirements are accurate timely and complete.

Documents Reviewed:

Quarterly Financial Statements

Comments:

Quarterly Financial Statements for the last 4 quarters (03/31/06, 06/30/06, 09/30/06, and 12/31/06) were incomplete and or inaccurate.

Recommendations:

CRS Yuma must provide complete, timely and accurate financial records.

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Financial Management

Standard:

FM 2

REGIONAL CONTRACTOR has developed and maintained a system that meets claims/encounter data processing requirements defined by ADHS/OCSHCN.

Citations: 42 CFR 438.242(b) (1) (3); ADHS/Regional Contractor Contract #HP361008, Task 10, Appendix G, and Appendix M, Financial Reporting Guide

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR has developed and maintained a system that meets claims/encounter data processing requirement defined by ADHS/OCSHCN.

Documents Reviewed:

Monthly Report of CRS Yuma Encounter Activity for July 2006 through March 2007

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Financial Management

Standard:

FM 3

REGIONAL CONTRACTOR submits complete, accurate and timely member demographic, eligibility and insurance data/information.

Citations: 42 CFR 438.242(a), (b) (1), and (b) (3); ADHS/Regional Contractor Contract #HP361008, Task 10

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does submit complete, accurate and timely member demographic, eligibility and insurance data/information.

Documents Reviewed:

CRS Yuma Provider and Member Load Error Reports (LER) for July 2006 through March 2007.

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Financial Management

Standard:

FM 4

REGIONAL CONTRACTOR staff are trained and familiar with the Business Continuity Plan.

Citations: ADHS/Regional Contractor Contract #HP361008, Task 45

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does show evidence of staff training on the Business Continuity Plan.

Documents Reviewed:

CRS Yuma CRS Disaster Plan Policy

CRS Yuma Business Continuity and Recovery Plan

CRS Yuma Emergency Management Plan

Comments:

Twelve people completed the required training. One did not. (94.44%)

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Financial Management

Standard:

FM 5

REGIONAL CONTRACTOR tests Business Continuity Plan on an annual basis.

Citations: ADHS/Regional Contractor Contract #HP361008, Task 45

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does review, test, and update its Business Continuity Plan annually.

Documents Reviewed:

Surge Capacity and YRMC; Yuma County Office of Emergency Management Exercise and Evaluation Program After Action Report; Meeting Minutes 8/9/06 and 12/19/06 Emergency Management Drill/Event Grid

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Financial Management

Standard:

TPL 1

REGIONAL CONTRACTOR cost-avoids all claims and services that are subject to third-party payment.

Citations: AAC R9-22-1001, 1009; ADHS/Regional Contractor Contract #HP361008

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does utilize a formal process to identify claims and services that are subject to third-party payment.

Documents Reviewed:

CRS Yuma Coordination of Benefits and Post Payment Recovery Policy

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Financial Management

Standard:

TPL 2

REGIONAL CONTRACTOR reports all known changes in health insurance information, including Medicare, to AHCCCS Division of Member Services, no later than 10 days from the date of discovery.

Citations: AAC R9-22-1001, 1009; ADHS/Regional Contractor Contract #HP361008

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does report known changes in health insurance information, including Medicare, to AHCCCS Division of Member Services, no later than 10 days from the date of discovery.

Documents Reviewed:

CRS Yuma Coordination of Benefits and Post Payment Recovery Policy

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Financial Management

Standard:

TPL 3

REGIONAL CONTRACTOR refers all cases that involve the following circumstances to the AHCCCS authorized representative, and REGIONAL CONTRACTOR does not pursue recovery on the case unless directed to do so by AHCCCS, or by the AHCCCS authorized representative.

Citations: AAC R9-22-1001, 1009; ADHS/Regional Contractor Contract #HP361008,

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does refer cases that involve the above-mentioned circumstances to the authorized representative.

REGIONAL CONTRACTOR does pursue recovery on cases that involve the above-mentioned circumstances unless they were authorized to do so by AHCCCS or by the AHCCCS authorized representative:

- | | |
|---|-------------------------|
| * Uninsured/underinsured motorist insurance | * Restitution Recovery |
| * First and third-party liability insurance | * Worker's Compensation |
| * Tortfeasors, including casualty | * Estate Recovery |
| * Special Treatment Trusts | |

Documents Reviewed:

CRS Yuma Coordination of Benefits and Post Payment Recovery Policy

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Financial Management

Standard:

TPL 4

REGIONAL CONTRACTOR utilizes a formal process to identify claims and services that are subject to third-party payment and ensure that applicable co-payments, coinsurance, or deductibles are paid by the REGIONAL CONTRACTOR on behalf of the member.

Citations: AAC R9-22-1001, 1009; ADHS/Regional Contractor Contract #HP361008, Task 10, Task 13

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does utilize a formal process to identify claims and services that are subject to third-party payment.

REGIONAL CONTRACTOR does pay applicable co-payments, coinsurance, or deductibles on behalf of the member.

Documents Reviewed:

CRS Yuma Coordination of Benefits and Post Payment Recovery Policy

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

General Administration

ADHS REVIEW TEAM:

**Jennifer Vehonsky, Division Chief of Compliance
Mark Haldane, Contract Administrator
Vicki Margaritis, Contract Administrator
Tim Stanley, Fraud and Abuse Manager**

CONTRACTOR STAFF:

**Luz Valle, Business Administrator
Pam Miller, Director
Sandra Thomas, Compliance Specialist**

DATE OF REVIEW:

April 24 - 25, 2007

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

General Administration

Standard:

GA 1

REGIONAL CONTRACTOR meets minimum CRSA staffing requirements.

Citations: ADHS/Regional Contractor Contract #HP361008, Terms & Conditions, 7. Key Personnel

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does meet minimum CRSA staffing requirements. REGIONAL CONTRACTOR meets 100% of the 10 required positions.

Documents Reviewed:

Organizational Charts

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

General Administration

Standard:

GA 2

REGIONAL CONTRACTOR notifies CRS of key personnel changes.

Citations: ADHS/Regional Contractor Contract #HP361008, Terms & Conditions, 7. Key Personnel

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does notify CRS of key personnel changes.

1 # of key personnel changes from July 1, 2006, to March 31, 2007
100% of key personnel changes reported to CRSA

Documents Reviewed:

E-mails from Regional Contractor to ADHS/CRSA regarding resignation of Administrator

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

General Administration

Standard:

GA 3

REGIONAL CONTRACTOR develops, maintains and disseminates a policy and procedure manual that includes the processes to carry out requirements of the CRSA RCPDM.

Citations: ADHS/Regional Contractor Contract #HP361008, RCMMP Chapter 80.503

Rating: PARTIAL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does review policies on an annual basis or as needed, to reflect CRSA RCPDM changes.

REGIONAL CONTRACTOR does not disseminate the CRSA RCPDM and its policies and procedures to its providers.

Documents Reviewed:

2/21/07 letter to CRS providers

Policy and Procedure and Forms Committee Guidelines

Comments:

The documentation provided does not prove that providers are notified of changes in the RCPDM as they occur throughout the year.

Recommendations:

CRS Yuma must notify providers of policy changes as they occur and maintain documentation that verifies that notification.

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

General Administration

Standard:

GA 4

REGIONAL CONTRACTOR's Provider Manual meets all CRSA and AHCCCS contractual requirements, and is disseminated to all providers.

Citations: ADHS/Regional Contractor Contract #HP361008, Task 40, RCPPM Chapter 80.502

Rating: PARTIAL COMPLIANCE

Findings:

REGIONAL CONTRACTOR's Provider Manual does meet CRSA and AHCCCS contractual requirements.

REGIONAL CONTRACTOR does not provide proof of dissemination of the Provider Manuals as required.

Documents Reviewed:

Provider Manual

Comments:

Although CRS Yuma did provide evidence that the Provider Manual is disseminated to its new providers, it did not provide documentation that updates and changes are disseminated to its providers.

Recommendations:

CRS Yuma must disseminate Provider Manual updates and changes to its providers and maintain documentation to verify that dissemination.

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

General Administration

Standard:

GA 5

REGIONAL CONTRACTOR meets program integrity requirements designed to prevent, detect and report fraud and abuse.

Citations: Contract #HP361008 Terms & Conditions, 7. Key Personnel, 42 CFR 438.608 (a) and (b), 42 CFR 438.610(a) and (b); ADHS/Regional Contractor Contract, Task 46; CRSA RCPPM Chapter 80.800

Rating: SUBSTANTIAL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does have a Corporate Compliance Plan in place.

REGIONAL CONTRACTOR does not have program integrity arrangements or procedures in place that include:

- Written policies, procedures and standards of conduct articulating the organization's commitment to comply with all applicable Federal and State standards
- The designation of a compliance officer and a compliance committee that are accountable to senior management
- Effective training and education for the compliance officer and the organization's employees
- Effective lines of communication between the compliance officer and the organization's employees
- Enforcement of standards through well-publicized disciplinary guidelines
- Provision for internal monitoring and auditing
- Provision for prompt response to detected offenses, and for development of corrective action initiatives relating to their contract.
-

REGIONAL CONTRACTOR does maintain policies and procedures governing its contracting and employment processes, and its corporate affiliations that exclude individuals from participating in procurement and non-procurement activities due to their debarment, suspension, revocation, restriction or otherwise exclusion due to federal or state requirements.

REGIONAL CONTRACTOR does follow these policies and procedures in its initial and ongoing contracting, employment and corporate affiliation practices.

Documents Reviewed:

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

General Administration

- Compliance Officer and Compliance Specialist job descriptions
- YRMC Corporate Compliance Plan
- YRMC Code of Conduct
- Related fraud and abuse policies
- Corporate Compliance Committee agenda, notes and sign-in sheets
- List of Corporate Compliance Committee members
- Fraud and abuse training materials and sign-in sheets
- YRMC contractor policy and checklist
- Fraud and Abuse reporting form

Comments:

CRS Yuma operates under Yuma Regional Medical Center's (YRMC) Corporate Compliance Program as a subdivision of the hospital. YRMC's integrity program (Corporate Compliance Program) appears to be adequate and does address six of the seven elements required for a comprehensive corporate compliance program. There was no documentation to support that the YCRS' designated Corporate Compliance Officer has attended any of the YRMC Corporate Compliance Committee meetings for the period reviewed. CRS Yuma's fraud and abuse policy does not make it clear if the CRS Yuma designated Corporate Compliance Officer has the independence to report instances of suspected fraud or program abuse directly to AHCCCS-OPI and ADHS.

Recommendations:

CRS Yuma or YRMC must conduct audits or reviews that would be adequate to detect fraud and program abuse within the CRS Yuma Clinic or any of the clinic's contractors. CRS Yuma must ensure that their designated Compliance Officer attends and participates in the YRMC Corporate Compliance Committee meetings.

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

ADHS REVIEW TEAM: Margery Sheridan, Division Chief of Consumer Rights
Luci Hodge, Appeals Coordinator

CONTRACTOR STAFF: Lorraine Falto-Toro, Clinical Supervisor
Luz Valle, Business Supervisor

DATE OF REVIEW: April 24 - 25, 2007

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 1

REGIONAL CONTRACTOR provides members with written Notices of Action and/or Notices of Extension that meet required format standards.

Citations: 42 CFR 438.404(a); 42 CFR 438.404(b); 42 CFR 438.404(c); 42 CFR 438.210(c); 42 CFR 431.211; 213 and 214; ADHS/Regional Contractor Contract, Task 30; RCPDM Chapter 80

Rating: PARTIAL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does not have a Notice of Action and/or Notice of Extension template letter in:

- Prevalent non-English languages
- Alternative formats
- Easily understood language and format.

REGIONAL CONTRACTOR's Notice of Action and/or Notice of Extension do meet language and format (4th grade level) requirements, ensuring ease of understanding.

Documents Reviewed:

CRS Yuma Care Coordination; Notices to ALTCS/Acute Care Coordinators Policy

CRS Yuma Prior Authorization Review Policy

CRS Yuma Notice of Action (NOA Denial) Log

Notices of Action and/or Notices of Extension Template Letters

Comments:

CRS Yuma submitted a draft Care Coordination; Notices to ALTCS/Acute Care Contractors Policy, dated 04/07.

Recommendations:

CRS Yuma must provide Notices of Action and/or Notices of Extension Template Letters, in English or Spanish as appropriate.

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 2

REGIONAL CONTRACTOR provides members with written Notices of Action that meet required content standards.

Citations: 42 CFR 438. 210; 42 CFR 438.404; RCPPI Chapter 80.402

Rating: NOT RATED

Findings:

REGIONAL CONTRACTOR's Notice of Action does/does not contain all of the following required elements:

- The action taken by REGIONAL CONTRACTOR,
- The law, rule, and/or policy supporting the action,
- The reasons for the action,
- The member 's or provider's right to file an appeal,
- The procedures for exercising the right to appeal,
- The circumstances under which expedited resolution is available and how to request it,
- The member's right to have benefits continue pending resolution, how to request continuation, and the circumstances under which the member may be required to pay the cost of services.

Documents Reviewed:

CRS Yuma Care Coordination; Notices to ALTCS/Acute Care Coordinators Policy

CRS Yuma Prior Authorization Review Policy

CRS Yuma Notice of Action (NOA Denial) Log

Notices of Action and/or Notices of Extension Template Letters

Comments:

CRS Yuma did not have any service denials requiring them to provide members with written Notices of Action during the review period, July 1, 2006 to March 31, 2007.

Recommendations: None

**ADHS/OC SHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 3

REGIONAL CONTRACTOR provides members with written Notices of Action within the required timeframes.

Citations: 42 CFR 438.210; 42 CFR 438.404; RCPM Chapter 61.800; Chapter 80.402

Rating: NOT RATED

Findings:

REGIONAL CONTRACTOR does/does not provide written notice Notices of Action within the required timeframes.

In NA % of files reviewed, members were provided with the written Notice of Action within the required timeframes.
(100% of denials are currently reviewed)

Documents Reviewed:

CRS Yuma Care Coordination; Notices to ALTCS/Acute Care Coordinators Policy

CRS Yuma Prior Authorization Review Policy

CRS Yuma Notice of Action (NOA Denial) Log

Notices of Action and/or Notices of Extension Template Letters

Comments:

CRS Yuma did not report any prior authorized service denials for the review period. CRS Yuma did not have any written Notices of Actions to review for evaluation of meeting required timeframes.

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 4

REGIONAL CONTRACTOR provides the member with a written Notice of Extension when taking more than 14 (standard) or 3 (expedited) working days to decide initial request for service authorization, or when the REGIONAL CONTRACTOR determines that the service requested is not a CRS covered benefit, and refers the request to the member's primary AHCCCS plan.

Citations: 42 CFR 438.408; ACOM Chapter 409; RCPDM Chapter 80

Rating: NOT RATED

Findings:

REGIONAL CONTRACTOR does/does not provide the member with written Notices of Extension within the required timeframes for:

- Standard requests for initial service authorization;
- Expedited requests for initial service authorization; or
- When referring the request for service to the member's primary AHCCCS plan

In NA % of files reviewed, members were provided with the written notice of extension within the required timeframes.
(100% of denials are currently reviewed)

Documents Reviewed:

Written Notice of Extension Letter Template for taking more than 14 (standard) or 3 (expedited) working days to decide initial request for service authorization, or when CRS Yuma determines that the service requested is not a CRS covered benefit, and refers the request to the member's primary AHCCCS plan.

CRS Yuma Care Coordination; Notices to ALTCS/Acute Care Coordinators Policy

CRS Yuma Prior Authorization Review Policy

CRS Yuma Notice of Action (NOA Denial) Log

Notices of Action and/or Notices of Extension Template Letters

Comments:

Although CRS Yuma does have a process in place to provide members with written Notices of Extension, it did not issue any such notices during the review period.

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS4A

REGIONAL CONTRACTOR provides members with written Notices of Extension that meet required content standards.

Citations: 42 CFR 438. 210; 42 CFR 438.404; RCPPI Chapter 80

Rating: NOT RATED

Findings:

REGIONAL CONTRACTOR's Notice of Action does/does not contain the following required elements:

- The reason for the decision to extend the timeframe; and
- The member's right to file a grievance if he/she disagrees with that decision.

REGIONAL CONTRACTOR's Notices of Extension do/do not contain all required elements.

Documents Reviewed:

CRS Yuma Care Coordination; Notices to ALTCS/Acute Care Coordinators Policy

CRS Yuma Prior Authorization Review Policy

Notices of Action and/or Notices of Extension Template Letters

Comments:

Although CRS Yuma has a Notice of Extension template that contains all the required elements, it did not issue any such notices to members during the review period.

Recommendations: None

**ADHS/OC SHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS4B

REGIONAL CONTRACTOR provides timely, written notification to the member's primary AHCCCS plan when the REGIONAL CONTRACTOR determines that the service requested is not a CRS covered benefit.

Citations: 42 CFR 438.408; ACOM Chapter 409; RCPDM Chapter 80

Rating: NOT RATED

Findings:

REGIONAL CONTRACTOR does/does not provide timely, written notification to the member's primary AHCCCS plan when the REGIONAL CONTRACTOR determines that the service requested is not a CRS covered benefit.

In NA % of files reviewed, members were provided with the written notice of extension within the required timeframes.
(100% of denials are currently reviewed)

Documents Reviewed:

CRS Yuma Care Coordination; Notices to ALTCS/Acute Care Coordinators Policy
CRS Yuma Prior Authorization Review Policy
Notices of Action and/or Notices of Extension Template Letters

Comments:

CRS Yuma did not report any prior authorized service denials for the review period of June 1, 2006 to March 31, 2007, and therefore, did not have the occasion to notify the member's primary AHCCCS plan.

Recommendations: None.

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 5

REGIONAL CONTRACTOR provides the member with written notice that for service authorization decisions not reached within 14 days (or an extended time frame), the authorization shall be considered denied on the date that the time frame expires. Citations: 42 CFR 438.404; 42 CFR 438.408; RCPDM Chapter 60

Rating: NOT RATED

Findings:

REGIONAL CONTRACTOR does/does not provide the member with written notice that for service authorization decisions not reached within 14 days (or an extended time frame), the authorization shall be considered denied on the date that the time frame expires.

- Standard requests for initial service authorization (14 working days),
- Expedited requests for initial service authorization (3 working days),
- Extensions an additional 14 days.

In NA % of files reviewed, members were provided with the written notice of service authorizations deemed denied.
(100% of denials are currently reviewed)

Documents Reviewed:

CRS Yuma Care Coordination; Notices to ALTCS/Acute Care Coordinators Policy
CRS Yuma Prior Authorization Review Policy

Comments: CRS Yuma did not encounter any circumstances in which it was required to provide a member with written notice that service authorization decisions not reached within required timeframes are deemed denied.

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 6

REGIONAL CONTRACTOR handles grievances and appeals in a manner that is consistent with federal and state requirements.

Citations: 42 CFR 438.402(b)(2)(3); 42 CFR 438.406(a)(1 –3); 42 CFR 438.406(b)(1– 4); 42 CFR 438.410; 42 CFR 438.414;
ADHS/Regional Contractor Contract Task 32; RCPDM Chapters 60 and 80

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does have procedures in place for filing of grievances and appeals by member, or by provider with member's consent, as appropriate.

REGIONAL CONTRACTOR does have a process in place for members or providers to file grievances orally or in writing.

REGIONAL CONTRACTOR does have a process in place for members or providers to file appeals either orally or in writing with oral appeals confirmed in writing unless requesting an expedited resolution.

Documents Reviewed:

CRS Yuma Grievance Policy

CRS Yuma Appeals Policy

CRS Yuma Care Coordination; Notices to ALTCS/Acute Care Coordinators Policy

CRS Yuma Prior Authorization Review Policy

Comments:

There were no appeals filed during the review period of July 1, 2006 to March 31, 2007. Standard and findings are met with respect to grievances.

Recommendations: None

**ADHS/OC SHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 7

REGIONAL CONTRACTOR provides members with assistance in the grievance and appeals process.

Citations: 42 CFR 438.10(g); RCPDM Chapter 60.204

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does provide members with assistance in completing forms and other procedural steps in the grievance process.

REGIONAL CONTRACTOR does have a process in place to provide assistance in completing forms and other procedural steps in the appeals process.

REGIONAL CONTRACTOR does provide interpreter services and toll-free numbers with TTY/TTD and interpreter capability for grievance and appeals process.

Documents Reviewed:

CRS Yuma Grievance Policy

CRS Yuma Appeals Policy

Comments:

There were no appeals filed during the review period of July 1, 2006 to March 31, 2007. Standard and findings are met with respect to grievances.

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 8

REGIONAL CONTRACTOR acknowledges receipt of each grievance and appeal in a timely manner.

Citations: 42 CFR 438.404; RCPPM Chapter 60.300

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does acknowledge receipt of each grievance.

100% of grievance files reviewed indicate the grievance was acknowledged.

REGIONAL CONTRACTOR does/does not acknowledge receipt of each appeal.

NA % of appeal files reviewed indicates the appeal was acknowledged.

REGIONAL CONTRACTOR does meet timeframe for acknowledging receipt of grievance (i.e., within 5 business days for standard appeals/1 business day for expedited appeals)

100 % of grievance files reviewed indicates the grievance was acknowledged within 5 business days (1 business day for expedited appeals).

Documents Reviewed:

CRS Yuma Grievance Policy

CRS Yuma Appeals Policy

Comments:

The CRS Regional Contractor did not have any appeals filed during the review period. Standard and findings are met with respect to grievances.

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 9

REGIONAL CONTRACTOR ensures decision-makers for the grievance and appeal are appropriately qualified individuals.

Citations: 42 CFR 438.404; RCPDM Chapter 60.300

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does use decision-makers on grievances that were not in previous levels of review or decision-making.

100 % of grievance files reviewed indicates the decision-makers on grievances were not in previous levels of review or decision-making.

REGIONAL CONTRACTOR does use decision-makers on appeals that were not in previous levels of review or decision-making.

NA % of appeal files reviewed indicates the decision-makers on appeals were not in previous levels of review or decision-making.

REGIONAL CONTRACTOR does use decision-makers on grievances that are health care professionals with clinical expertise in treating the member's condition when:

A grievance is filed regarding a denial of expedited resolution of an appeal;

A grievance is filed related to clinical decisions.

100 % of grievance files reviewed indicates the decision-makers were appropriately qualified to be decision-makers on the grievance.

REGIONAL CONTRACTOR does use decision-makers on appeals that are health care professionals with clinical expertise in treating the member's condition when:

An appeal is filed regarding a denial that is based on lack of medical necessity;

An appeal is filed related to clinical decisions.

NA % of appeal files reviewed indicates the decision-makers were appropriately qualified to be decision-makers on the appeal.

Documents Reviewed:

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

CRS Yuma Appeal Policy

CRS Yuma Grievance Policy

JCAHO certificate. Joint Commission ID#: 9518. The accreditation is effective March 11, 2006. The certificate and cycle are customarily valid for up to 39 months.

Comments:

There were no appeals filed during the review period of July 1, 2006 to March 31, 2007. Standard and findings are met with respect to grievances. CRS Yuma is JCAHO accredited.

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 10

REGIONAL CONTRACTOR provides members and/or their representative with an opportunity to examine their case file and to present evidence.

Citations: 42 CFR 438.406; RCPDM Chapter 60.402

Rating: NOT RATED

Findings:

REGIONAL CONTRACTOR does/does not provide members and/or their representatives with an opportunity to examine their case file and any other documents and records considered during the appeals process.

REGIONAL CONTRACTOR does/does not provide members and/or their representatives with an opportunity to present evidence in person or in writing.

REGIONAL CONTRACTOR does/does not include the member or her representative or legal representative of a deceased member's estate as a party to the appeal.

Documents Reviewed:

CRS Yuma Grievance Policy

CRS Yuma Appeals Policy

Comments:

There were no appeals filed during the review period of July 1, 2006 to March 31, 2007.

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 11

REGIONAL CONTRACTOR maintains an expedited review process for appeals.

Citations: 42 CFR 438.410; RCPDM Chapter 60.405

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does maintain an expedited review process for appeals, which includes:

- Not taking punitive action against a provider who requests an expedited resolution or supports a member's appeal,
- Transfer of the appeal to the timeframe for standard resolution if the request for expedited resolution is denied,
- Reasonable effort to give the member oral notice of the denial to expedite resolution, and
- Follow-up with written notice of denial within two calendar days.

Documents Reviewed:

CRS Yuma Appeal Policy

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 12

REGIONAL CONTRACTOR provides information about the grievance system to providers at the time they contract with REGIONAL CONTRACTOR.

Citations: 42 CFR 438. 414; RCPPM Chapter 60.200

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does provide information about the grievance system to providers at the time they contract with the CRS Regional Contractor.

Documents Reviewed:

CRS Yuma Grievance Policy

CRS Yuma Provider Manual

CRS Yuma Clinic Website

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 13

REGIONAL CONTRACTOR disposes of grievances, resolves appeals and provides notice within the required federal and state timeframes.

Citations: 42 CFR 438.408(b)(1-3); 42 CFR 438.408(c); 42 CFR 438.408(d)(1-2); 42 CFR 438.408(e); ADHS/Regional Contractor Contract Task 32; RCPDM Chapters 60 and 80

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does issue decisions as expeditiously as the member's condition requires, but no later than 90 days from receipt of grievance.

100 % of grievance files reviewed have documentation that written or oral decisions were issued as expeditiously as the member's condition requires, but no later than 90 days of receipt of grievance.

Documents Reviewed:

Grievance Files (6 cases)

CRS Yuma Grievance Policy

Comments:

There were no appeals filed during the review period of July 1, 2006 to March 31, 2007. Standard and findings are met with respect to grievances.

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 14

REGIONAL CONTRACTOR resolves standard appeals and provides written notice to affected parties no later than 30 days from receipt of appeal, absent an extension.

Citations: 42 CFR 438.408; RCPPM Chapter 60.404

Rating: NOT RATED

Findings:

REGIONAL CONTRACTOR does/does not issue written decisions for resolution of standard appeals no later than 30 days from receipt of appeal, absent an extension.

NA % of appeal files reviewed have documentation that written decisions were issued no later than 30 days of receipt of appeal, absent an extension.

(100% of denials are currently reviewed)

Documents Reviewed:

CRS Yuma Appeal Policy

Comments:

Although there were no appeals filed during the review period of July 1, 2006 to March 31, 2007, CRS Yuma does have a process in place to issue written decisions for resolution of standard appeals no later than 30 days from receipt of appeal, absent an extension.

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 15

REGIONAL CONTRACTOR resolves expedited appeals and provides notice to affected parties no later than three (3) working days from receipt of referral, absent an extension.

Citations: 42 CFR 438.410; RCPDM Chapter 60.405

Rating: NOT RATED

Findings:

REGIONAL CONTRACTOR does/does not issue written expedited decisions of appeals no later than three (3) working days from receipt of the appeal.

REGIONAL CONTRACTOR does/does not make reasonable effort to provide oral notice.

NA % of appeal files reviewed have documentation that written expedited decisions were issued no later than 3 working days from receipt of referral, and an effort was made to provide oral notice.
(100% of denials are currently reviewed)

Documents Reviewed:

CRS Yuma Appeal Policy

Comments:

Although there were no appeals filed during the review period of July 1, 2006 to March 31, 2007, CRS Yuma does have processes to issue written expedited decisions of appeals no later than three (3) working days from receipt of the appeal and make reasonable efforts to provide oral notice.

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 16

REGIONAL CONTRACTOR complies with extension of timeframe requirements for grievances, standard appeals and expedited appeals.

Citations: 42 CFR 438. 408; 42 CFR 438.410; RCPDM Chapter 60.404, 405

Rating: NOT RATED

Findings:

REGIONAL CONTRACTOR does/does not extend the timeframes for grievances up to 14 calendar days only if the member requests the extension or a need for additional information is demonstrated by REGIONAL CONTRACTOR. In NA % of grievance files reviewed, REGIONAL CONTRACTOR appropriately extends the timeframe for grievances. (100% of denials are currently reviewed)
REGIONAL CONTRACTOR does/does not extend the timeframes for appeals up to 14 calendar days only if the member requests the extension or a need for additional information is demonstrated by REGIONAL CONTRACTOR. In NA % of appeal files reviewed,

REGIONAL CONTRACTOR does/does not appropriately extend the timeframe for appeals. (100% of denials are currently reviewed)

REGIONAL CONTRACTOR does/does not extend the timeframes for expedited appeals up to 14 calendar days only if the member requests the extension or a need for additional information is demonstrated by REGIONAL CONTRACTOR. In NA % of expedited appeal files reviewed, REGIONAL CONTRACTOR appropriately extends the timeframe for expedited appeals. (100% of denials are currently reviewed)

REGIONAL CONTRACTOR does/does not provide written notice to the member if REGIONAL CONTRACTOR extends the timeframe requirements.

Documents Reviewed:

CRS Yuma Grievance and Appeal Policies and Grievance Files

Comments:

CRS Yuma had no extension of timeframe events for grievances, standard appeals and expedited appeals.

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 17

The CRS Regional Contractors Notice of Appeal Resolution contains all required elements.

Citations: 42 CFR 438.404; RCPDM Chapter 80.402; Chapter 60.407

Rating: NOT RATED

Findings:

REGIONAL CONTRACTOR's Notice of Appeal Resolution does/does not contain all of the following required elements:

- Results of resolution process and date completed,
- If not resolved wholly in members favor, the legal basis for the decision, the right to and how to request a State fair hearing, the right to receive benefits while hearing is pending and potential liability for costs.

In NA % of appeal files reviewed, the Notice of Appeal Resolution contained all required elements.
(100% of denials are currently reviewed)

Documents Reviewed:

CRS Yuma Appeal Policy

Comments: There were no appeals filed during the review period of July 1, 2006 to March 31, 2007.

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 18

REGIONAL CONTRACTOR maintains grievance and appeal logs that identify the complainant, date of receipt, nature of the appeal, date the issue is resolved, and the resolution.

Citations: 42 CFR 438.416; ADHS/Regional Contractor Contract, Task 32; RCPDM Chapter 60

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does record all required information in the grievance logs.

REGIONAL CONTRACTOR does record all required information in the appeal logs.

Documents Reviewed:

CRS Yuma Grievance Logs

CRS Yuma Appeal Logs

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 19

REGIONAL CONTRACTOR, as appropriate, continues the member's benefits pending an appeal or State fair hearing in compliance with Federal and State requirements.

Citations: 42 CFR 438.420.b-d; RCPDM Chapter 60.608

Rating: NOT RATED

Findings:

REGIONAL CONTRACTOR does/does not continue the member's benefits pending an appeal or state fair hearing if:

- The member or the provider files the appeal timely,
- The appeal involves the termination, suspension, or reduction of a previously authorized course of treatment,
- The services were ordered by an authorized provider,
- The member requests extension of benefits.
- In NA % of appeal records reviewed, the member's benefits were appropriately continued pending an appeal or state fair hearing. (100% of denials are currently reviewed)

REGIONAL CONTRACTOR does/does not discontinue providing the member's benefits only if:

- The member withdraws the appeal,
- Ten days pass after the MCO or PIHP mails the notice, providing the resolution of the appeal against the member, unless the member, within the 10-day timeframe, has requested a State fair hearing with continuation of benefits until a State fair hearing decision is reached,
- A State fair hearing Office issues a hearing decision adverse to the member,
- The time period or service limits of a previously authorized service has been met.

In NA % of appeal records reviewed, the member's benefits were appropriately discontinued. (100% if denials are currently reviewed)

REGIONAL CONTRACTOR only recovers the cost of providing the benefit when the final resolution of the appeal is adverse to the member. (REGIONAL CONTRACTOR may choose not to pursue payment).

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Documents Reviewed:

CRS Yuma Appeals Policy

Comments:

Although there were no appeals filed during the review period of July 1, 2006 to March 31, 2007, CRS Yuma does have processes in place to continue or discontinue the member's benefits appropriately as identified in the findings above.

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 20

REGIONAL CONTRACTOR, as appropriate, provides or pays for the disputed services when the appeal resolution is reversed by the State Fair Hearing Officer.

Citations: 42 CFR 438.424.a and b; RCPDM Chapter 60.609

Rating: NOT RATED

Findings:

REGIONAL CONTRACTOR does/does not promptly provide disputed services, when the State Fair hearing officer reverses a decision to deny, limit or delay services that were not provided pending the appeal.

REGIONAL CONTRACTOR does/does not pay for disputed services, when the State Fair hearing officer reverses a decision to deny authorization of the services and the member received the disputed services while the appeal was pending.

Documents Reviewed:

CRS Yuma Appeal Policy

Comments:

Although there were no appeals filed during the review period of July 1, 2006 to March 31, 2007, CRS Yuma does have processes in place to promptly provide disputed services, when the State Fair hearing officer reverses a decision to deny, limit or delay services that were not provided pending the appeal, and to pay for disputed services, when the State Fair hearing officer reverses a decision to deny authorization of the services and the member received the disputed services while the appeal was pending.

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 21

REGIONAL CONTRACTOR complies with claims dispute requirements.

Citations: RCPDM Chapter 50

Rating: NOT RATED

Findings:

REGIONAL CONTRACTOR does/does not provide a member/provider with written acknowledgement of receipt of a claim dispute within 5 working days.

N/A % of files reviewed contained documentation of written acknowledgement of receipt of a claim dispute within 5 working days.
(100% of denials are currently reviewed)

REGIONAL CONTRACTOR does/does not provide a provider with written notice of claims dispute within required timeframes.

N/A % of files reviewed contained documentation that written notices of decision of the claims dispute was provided to the provider within 30 days after the filing of a claims dispute. (100% of denials are currently reviewed)

REGIONAL CONTRACTOR does/does not document claims dispute decision extension agreements.

N/A % of files reviewed contained documentation of extension agreements for those decisions not issued within 30 days after the filing of a claims dispute. (100% of denials are currently reviewed)

Documents Reviewed:

CRS Yuma Claim Dispute Policy

Comments:

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Although there were no claims disputes filed during the review period of July 1, 2006 to March 31, 2007, CRS Yuma does have a process in place to provide a member/provider with written acknowledgement of receipt of a claim dispute within 5 working days; to provide a provider with written notice of claims dispute within required timeframes; and document claims dispute decision extension agreements.

Recommendations: None

**ADHS/OC SHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 22

REGIONAL CONTRACTOR claim dispute notice of decision includes all required information.

Citations: ARS Title 36, Chapter 29; ARS §12-1518; RCPPM Chapter 50.400

Rating: NOT RATED

Findings:

REGIONAL CONTRACTOR claim dispute notice of decision policy does/does not include the following:

A statement of the nature of the claim dispute and the issues involved, and will:

- Approve or deny the claim for payment, or
- Affirm or reverse the denial, in whole or in part, or
- Affirm or reverse the sanction, in whole or in part, and
- Include the date of the decision
- Include a statement of the reasons for the decision and the statutes, rules and policies involved, and
- Include a statement that a provider dissatisfied with the decision may request an administrative hearing by filing a request with the CRSA Division of Consumer Rights within 30 days of receipt of the decision. Included with the statement is a description of the provider's right to request an informal settlement conference.

NA % of Notices of Decision included all required information. (100% of denials are currently reviewed)

Documents Reviewed:

CRS Yuma Claim Dispute Policy

Comments:

There were no claims disputes filed during the review period of July 1, 2006 to March 31, 2007.

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 23

REGIONAL CONTRACTOR has a process of recording and maintaining records of claims disputes.

Citations: ARS Title 36, Chapter 29; ARS §12-1518; RCPPM Chapter 50.400

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does maintain records of claims disputes.

Documents Reviewed:

CRS Yuma Claim Dispute Policy

Comments:

CRS Yuma has a process to maintain records of claims disputes.

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007
Grievance System**

Standard:

GS 24

REGIONAL CONTRACTOR pays within 10 business days denied claims reversed in the claims dispute process.

Citations: ARS Title 36, Chapter 29; RCPPM Chapter 50.400

Rating: NOT RATED

Findings:

REGIONAL CONTRACTOR does/does not pay denied claims within 10 business days of the date the denial is reversed.

Documents Reviewed:

CRS Yuma Claim Dispute Policy

CRS Yuma Claim Dispute Log

Comments:

Although there were no claims disputes filed during the review period of July 1, 2006 to March 31, 2007, CRS Yuma does have a process in place to pay denied claims within 10 business days of the date the denial is reversed.

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Medical Management

ADHS REVIEW TEAM: Ashraf Lasee, Division Chief of Medical Management
Michele Reese, Utilization Management Specialist
Earlene Allen, Utilization Management Specialist
Kristy Benton, Utilization Management Specialist

CONTRACTOR STAFF: Pam Dallabetta, Administrative Director
Sandra Thomas, Compliance Specialist
Loraine Fallto-Torres, Clinical Supervisor
Luz Valle, Business Operations Supervisor

DATE OF REVIEW: April 24 - 25, 2007

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CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Medical Management

Standard:

MM 1

REGIONAL CONTRACTOR has implemented procedures for utilization management program requirements, which are consistent with AHCCCS standards.

Citations: AMPM Ch. 1000, Policy 1010; 42 CFR 438.240; 42 CFR 456.1; 42 CFR 456.3; 42 CFR 456.5] CRSA Process Monitoring Tools: Prior Authorization, Retrospective Review, and Concurrent Review

Rating: SUBSTANTIAL COMPLIANCE

Findings:

REGIONAL CONTRACTOR has not implemented processes for monitoring and evaluating utilization of services which the Plan has identified as variances (both over and under) in utilization patterns.

REGIONAL CONTRACTOR does have policies and procedures related to service authorizations for prior authorization reviews.

REGIONAL CONTRACTOR does have policies and procedures related to service authorizations for concurrent review.

REGIONAL CONTRACTOR does have policies and procedures related to service authorizations for retrospective review.

REGIONAL CONTRACTOR does assess the quality of services provided when utilization data variances are present (over and under utilization).

REGIONAL CONTRACTOR has addressed identified variances.

Documents Reviewed:

CRS Yuma Organizational Chart

R.N. Licenses- confirmation of Medical Director's licensure & hospital privilege status

YRMC Performance Management Plan CHS Nurse

Utilization Management Committee Structure

YRMC Policy , procedures and forms Committee Guidelines

Agenda, sign in sheet & minutes from MM/UM- QA meeting 11/21/06

Agenda, & minutes from MM/UM- QA meeting 12/21/06

CRS Yuma Corrective action plan 12/1/06

CRS Yuma Team meeting sign in sheet & minutes 1/29/07 & 3/5/07

CRS Yuma Prior Authorization Review Policy

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CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Medical Management

Notification of extension for service authorization Timeframe template
CRS Yuma Prior Authorization Provider Service Requisition (PSR)
CRS Yuma Audiology Provider Service Requisition (PSR)
CRS Yuma DME Provider Service Requisition (PSR)
CRS Yuma Concurrent Review Policy
CRS Yuma Concurrent Review Form
CRS Yuma Retrospective Review- Emergency Services Review Policy
CRS Yuma Retrospective Review-Form
Clinical Practice Guidelines Review & Website dissemination to YCRS Provider & member Manuel
New Medical Technology Policy
Out of state services Policy
Pharmaceuticals Policy
DME Utilization

Comments:

CRS Yuma has implemented procedures for utilization management program requirements, however, CRS Yuma provided insufficient documentation of utilization data review, analysis and trending in UM/QM committee meetings on regular basis.

Recommendations:

CRS Yuma must ensure full implementation of all developed policies. CRS Yuma shall conduct MM/UM/QM meetings on a regular scheduled basis. Identify how inpatient, ambulatory surgery, out patient services will be monitored for over and under utilization, gather data, identify trends, implement interventions and analyze the results of action taken.

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Medical Management

Standard

MM 2

REGIONAL CONTRACTOR reviews utilization data and reports trends, variances, analysis/ evaluation, interventions through the Medical Management Committee. REGIONAL CONTRACTOR acts and follows through on committee recommendations.

Citations: AMPM Ch. 1000, Policy 1010; 42 CFR 438.240; 42 CFR 456.1; 42 CFR 456.3; 42 CFR 456.5

Rating: PARTIAL COMPLIANCE

Findings

REGIONAL CONTRACTOR does have a forum/meeting to discuss medical/utilization management issues on regular basis.

REGIONAL CONTRACTOR does not have minutes from the committee meetings which reflect the following:

- Reporting of data over time reflecting any trends;
- Addresses any untoward trends and minutes reflect analysis and plans for interventions;

REGIONAL CONTRACTOR does report on the previous meetings recommendations, analyzes interventions and makes changes based on the recommendations.

Documents Reviewed:

Agenda, minutes and sign in sheet from MM/UM- QA meeting 11/21/06

Agenda, minutes and sign in sheet from MM/UM- QA meeting 12/21/06

Team meeting 1/29/07 agenda & sign in sheet

Team meeting 3/5/07 agenda & sign in sheet

Comments:

CRS Yuma MM/UM/QM meetings were not held on quarterly basis as listed in their meeting schedule, however, CRSA found 2 out of 3 meeting minutes, both held one month apart (November and December). There is limited evidence of significant data being presented in committee meetings. CRS Yuma did not demonstrate a system of selecting and reporting of data being evaluated and actions/intervention planned.

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Medical Management

Recommendations:

CRS Yuma must conduct MM/UM/QM meetings on regular scheduled basis, including sign-in sheet, agenda and minutes with action items for follow up. CRS Yuma should consider regular utilization data review, identify trends, implement interventions, analyze the actions taken and make changes to the course of action if necessary.

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Medical Management

Standard

MM 3

REGIONAL CONTRACTOR has implemented procedures for utilization management program requirements, which are consistent with CRSA and AHCCCS standards.

Citations: Contract #HP361008; AMPM Chapter 1000; Policy 1010; 42 CFR 438.114; 438.114; 42 CFR 438.236

Rating: FULL COMPLIANCE

Findings

REGIONAL CONTRACTOR has implemented processes for monitoring and evaluating utilization of services to include:

- Inpatient Stays (prior authorization and concurrent review process)
- Durable Medical Equipment (Prior authorization process)
- Emergent Services (Retrospective review process)
- Ambulatory Surgeries (Retrospective review process)

Documents Reviewed

CRS Yuma Prior Authorization Review Policy

CRS Yuma Prior Authorization Provider Service Requisition (PSR)

CRS Yuma Audiology Provider Service Requisition (PSR)

CRS Yuma DME Provider Service Requisition (PSR)

CRS Yuma Concurrent Review Policy

CRS Yuma Concurrent Review Form

CRS Yuma Retrospective Review- Emergency Services Review Policy

CRS Yuma Retrospective Review-Form

Utilization Management/Medical Management Training 4/3/07 by CRS Yuma Compliance Officer

DME Utilization policy

Utilization Management Committee Structure

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Medical Management

Comments:

CRS Yuma staff has worked very hard in developing their policy /procedures for utilization management program requirements, which are consistent with CRSA and AHCCCS standards.

Recommendations: None

**ADHS/OC SHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Medical Management

Standard

MM 4

REGIONAL CONTRACTOR adopts and monitors provider compliance with National clinical practice guidelines and or local standards of practice.

Citations: Contract #HP361008; AMPM Chapter 1000; Policy 1010; 42 CFR 438.114; 438.114; 42 CFR 438.236

Rating: FULL COMPLIANCE

Findings

REGIONAL CONTRACTOR has adopted practice guidelines in consultation with the contracting health care professionals that:

- Are reviewed and updated annually by ADHS/CRSA and CRS Regional Contractors Medical Directors.
- Are based on valid and reliable clinical evidence or health care professional consensus,
- Consider the needs of its individuals receiving medical care,
- Are adopted in consultation with contracting health care professionals and CRSA Medical Director,

REGIONAL CONTRACTOR has disseminated CRSA clinical practice guidelines to affected providers; and upon request to individuals receiving medical care.

REGIONAL CONTRACTOR does have adequate structural elements in place for implementation of the Practice Guidelines. in 10 out of 10 (100%) charts reviewed, present the evidence of adequate structure elements in place for the CL/CP patients.

Documents Reviewed

Selected medical charts of CRS members diagnosed with cleft lip / cleft palate.

YRMC CRS Policy: Clinical Practice Guidelines (Origination date 04/07)

YRMC CRS Policy: Cleft Palate Clinic (revised 10/04)

CRS Yuma Cleft Lip/Cleft Palate Worksheet

CRS Yuma website materials for practice guidelines-specific information:

CRS Yuma Provider Manual

ALL 6 CRSA recommended Clinical Practice Guidelines

CRS Yuma Orientation Check list for Physicians

CRS Yuma Intranet materials:

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CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Medical Management

Policy and Procedure Manual

YRMC CRS Policy: Orientation for Physicians

E-mail communication to CRSA dated 3/6/2007: CRS Yuma Dissemination of Information (re: practice guidelines)

YRMC CRS Policy: New Medical Technologies

Comments:

The Review Team commends CRS Yuma for the clearly-written, well-constructed worksheet present in the cleft lip/cleft palate patients' charts. The worksheet lists and tracks use of the age-appropriate clinical practice guidelines for this condition.

Recommendations: None

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CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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Medical Management

Standard:

MM 5

REGIONAL CONTRACTOR has a structure and process in place for the review of prior authorization requests.

Citations: Contract #HP361008; RCPM Ch 80; AMPM Chapter 1000, Policy 1020; 42 CFR 438.210; 42 CFR 438.114; 42; 42 CFR 422.113(c); CRSA Process Monitoring Tools: Prior Authorization

Ratings: FULL COMPLIANCE

Finding:

REGIONAL CONTRACTOR is using qualified, professional medical staff to conduct authorization review (a physician, physician assistant, nurse practitioner and/or a RN/BSN) with appropriate training to apply CRS medical criteria or make medical decisions.

REGIONAL CONTRACTOR does ensure that Regional Clinics utilize standardized criterion when making prior authorization decisions.

REGIONAL CONTRACTOR does have a written policy and procedure for prior authorization that include following elements:

- Process to authorize services in a sufficient amount, duration, or scope, such as timelines for the standard and expedited review process: 14 calendar days for Standard Request vs. 3 working days for expedited request; with an extension option of 14 calendar days for both.
- Shall not arbitrarily deny or reduce the amount, duration, or scope of a medically necessary service.
- Consultation with the requesting provider when appropriate.

REGIONAL CONTRACTOR does ensure that Regional Clinics' Medical Directors review, approve and sign all prior authorization denial decisions, including pharmacy.

REGIONAL CONTRACTOR does ensure that any decision rendered by Regional Clinics' Medical Directors to deny a service authorization or to authorize a service in an amount, duration or scope that is less than requested is made by a Physician who has appropriate clinical expertise in treating the member's condition or disease.

N/A In 0 out of 0 (%) files reviewed the denial decisions were reviewed for medical necessity by CRS Yuma's Medical Directors (No denial from YCRS between 07/01/2006-03/31/2007).

N/A In 0 out of 0 (%) files reviewed, rationale for the denial is clearly documented.

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CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Medical Management

Documents Reviewed:

R.N., Licenses- confirmation of Medical Director's licensure & hospital privilege status
YRMC Performance Management Plan CHS Nurse
CRS Yuma Prior Authorization Review Policy
CRS Yuma Prior Authorization Provider Service Requisition (PSR)
CRS Yuma Audiology Provider Service Requisition (PSR)
CRS Yuma DME Provider Service Requisition (PSR)

Comments

CRS Yuma staff has worked very hard in developing and implementing their prior authorization policy/process/procedures for requested services, which are consistent with CRSA and AHCCCS standards.

Recommendations: None

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CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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Medical Management

Standard:

MM 6

REGIONAL CONTRACTOR has implemented and monitors the Prior Authorization (PA) process and has adopted an Inter-rater reliability plan.

Citations: Contract #HP361008; RCPM Ch. 80; AMPM Chapter 1000, Policy 1020; 42 CFR 438.210; 42 CFR 438.114; 42 CFR 438.114; 42 CFR 422.113(c); CRSA Process Monitoring Tools: Prior Authorization

Rating: PARTIAL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does not evaluate the consistency with which individuals involved in PA decision making apply the standardized criteria.

REGIONAL CONTRACTOR does have written policies regarding inter-rate reliability training and testing for staff and Medical Director on annual basis.

REGIONAL CONTRACTOR does not ensure consistent application of review criteria and compatible decisions that include inter-rater reliability criterion.

REGIONAL CONTRACTOR does take action when criteria are not being applied in a consistent manner by the PA staff.

REGIONAL CONTRACTOR does have a process in place for review by another physician qualified to make a determination of necessity or denial, in the event an ordering physician challenges a denial.

REGIONAL CONTRACTOR does have a process to notify the requesting provider and/or a member of a decision to deny, limit or discontinue authorization of service and the steps for appealing an authorization decision.

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CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Medical Management

Documents Reviewed:

CRS Yuma Organizational Chart
R. N. Licenses- confirmation of Medical Director's licensure & hospital privilege status
YRMC Performance Management Plan CHS Nurse
McKesson Health Solutions LLC License agreement with Yuma Regional Medical Center including Yuma CES
CRS Yuma Prior Authorization Review Policy
CRS Yuma Prior Authorization Provider Service Requisition (PSR)
CRS Yuma Audiology Provider Service Requisition (PSR)
CRS Yuma DME Provider Service Requisition (PSR)
CRS Yuma Concurrent Review Policy
CRS Yuma Concurrent Review Form
CRS Yuma Retrospective Review- Emergency Services Review Policy
CRS Yuma Retrospective Review-Form
PowerPoint presentation & sign in sheet for Utilization Management/Medical Management Training 4/3/07 by CRS Yuma Compliance Officer- Sandra Thomas
YRMC CRS notification of extension for Service Authorization timeframe
YRMC CRS Notice of action letter

Comments

CRS Yuma does have a written process in their prior auth, concurrent and retro review policies and procedure regarding the consistent use of a standard criterion for compatible decision making, including the Regional Medical Director, however, there is no written process or plan in place for regular consistency check for Inter-rater reliability testing.

Recommendations

CRS Yuma must arrange IRR training and testing for all staff involved in medical necessity determination, including the Medical Director. CRS Yuma must conduct regular checks for consistent application of review criterion for IRR and document the findings.

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CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Medical Management

Standard

MM 6-A

REGIONAL CONTRACTOR has adopted an inter-rater reliability (IRR) plan for Prior Authorization, Concurrent and Retrospective Review.

Citations: ADHS/Regional Contractor Contract #HP361008; RCPPM Chapter 80; AMPM Chapter 1000; Policy 1020.

Rating: PARTIAL COMPLIANCE

Findings:

Prior Authorization

REGIONAL CONTRACTOR does have written policies regarding inter-rater reliability training and testing for staff and Medical Director on annual basis.

REGIONAL CONTRACTOR does not evaluate the consistency with which individuals involved in PA decision making apply the standardized criterion.

REGIONAL CONTRACTOR does not ensure consistent application of review criterion and compatible decisions that include inter-rater reliability criterion.

REGIONAL CONTRACTOR does take action when criteria are not being applied in a consistent manner by the PA staff.

REGIONAL CONTRACTOR does have a process in place for review by another physician qualified to make a determination of necessity or denial, in the event an ordering physician challenges a denial.

Concurrent Review

REGIONAL CONTRACTOR does have written policies regarding inter-rater reliability training and testing for staff (involved in concurrent review) and Medical Director on annual basis.

REGIONAL CONTRACTOR does have uniform review criterion for making hospital length of stay decisions.

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ADMINISTRATIVE REVIEW TOOL 2007**

Medical Management

REGIONAL CONTRACTOR does have a plan of action for staff that does not use standard criterion and timeline.

REGIONAL CONTRACTOR does evaluate the consistency with which individuals (concurrent review staff) involved in decision-making apply the standardized criteria for severity of illness and intensity of service.

REGIONAL CONTRACTOR does take action when criteria are not being applied in a consistent manner by concurrent review staff.

Retrospective Review

REGIONAL CONTRACTOR does have written policies regarding inter-rater reliability training and testing for staff (involved in retrospective review) and Medical Director on annual basis.

REGIONAL CONTRACTOR does have uniform review criterion for conducting medical necessity determination post delivery of services.

REGIONAL CONTRACTOR does not ensure consistent application of review criterion and compatible decisions that include inter-rater reliability criteria.

REGIONAL CONTRACTOR does take action when criteria are not being applied in a consistent manner by retro-review staff.

Documents Reviewed:

R.N. Licenses & confirmation of Medical Director's licensure & hospital privilege status
YRMC Performance Management Plan CHS Nurse
CRS Yuma Prior Authorization Review Policy
CRS Yuma Prior Authorization Provider Service Requisition (PSR)
CRS Yuma Audiology Provider Service Requisition (PSR)
CRS Yuma DME Provider Service Requisition (PSR)
CRS Yuma Concurrent Review Policy
CRS Yuma Concurrent Review Form
CRS Yuma Retrospective Review- Emergency Services Review Policy

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Medical Management

CRS Yuma Retrospective Review-Form

PowerPoint presentation & sign in sheet for Utilization Management/Medical Management Training 4/3/07 by CRS Yuma Compliance Officer- Sandra Thomas

YRMC CRS notification of extension for Service Authorization timeframe

YRMC CRS Notice of action letter

Comments:

CRS Yuma does have a written process in their prior auth, concurrent and retro review policies and procedure regarding the consistent use of a standard criterion for compatible decision making, including the Regional Medical Director, however, there is no written process or plan in place for regular consistency check for Inter-rater reliability testing.

Recommendations

CRS Yuma must arrange structured IRR training and testing for all staff involved in medical necessity determination, including the Medical Director on annual basis. CRS Yuma must conduct regular checks for consistent application of review criterion for IRR and document the findings.

CRS Yuma should consider documentation of their monitoring procedure regarding the consistency with which individuals involved in decision-making apply the standardized criteria (weekly or bi-monthly or monthly); (2) must document what action was taken when criteria are not being applied in a consistent manner

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CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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Medical Management

Standard:

MM 7

REGIONAL CONTRACTOR has a process for effective concurrent review of the medical necessity of inpatient stays.

Citations: Contract #HP361008, RCPM Ch 80; AMPM Chapter 1000; Policy 1030; 1040; 1050 & 1060 and 42 CFR 438.236 (a), (b), (c); CRSA Process Monitoring Tools: Concurrent Review

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does have qualified, professional medical staff to conduct review with appropriate training to apply CRS medical criteria or make medical decisions.

REGIONAL CONTRACTOR does ensure that the Regional Clinics utilize a standardized criterion for length of stay determinations.

REGIONAL CONTRACTOR concurrent review staff does have a process in place to communicate with the Regional Medical Director when a CRS member is found ineligible for a particular service or set of services.

REGIONAL CONTRACTOR does ensure that the Regional Clinic Medical Directors review, approve and sign all inpatient stay denial decisions.

REGIONAL CONTRACTOR has implemented policies that describe what relevant clinical information is to be obtained when making hospital length of stay decisions or level of care determination.

In 0 of 0 (%) files reviewed, hospital stay denial decisions were made by the Regional Clinic Medical Director or physician designee (No inpatient stay denials were issued from 7/1/06 thru 3/31/07).

REGIONAL CONTRACTOR does evaluate the consistency with which individuals involved in decision-making apply the standardized criteria.

REGIONAL CONTRACTOR does take action when criteria are not being applied in a consistent manner.

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Medical Management

REGIONAL CONTRACTOR does not provide incentives for the individual or entity to deny, limit, or discontinue medically necessary services to any member.

Documents Reviewed:

CRS Yuma Concurrent Review Policy

CRS Yuma Concurrent Review Form

R.N. Licenses & confirmation of Medical Director's licensure & hospital privilege status

YRMC Performance Management Plan CHS Nurse

Power-point presentation & sign in sheet for Utilization Management/Medical Management Training 4/3/07 by CRS Yuma Compliance Officer

McKesson Health Solutions LLC License agreement with Yuma Regional Medical Center including CRS Yuma

DME Utilization Policy

YRMC/CRS Policy, procedure and forms Committee Guidelines

Concurrent review Education sign in sheet

Comments:

The CRS Yuma concurrent review forms reflect the use of standardized criteria, if timelines were met and communication with the Medical Director if necessary.

Recommendations: None

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CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Medical Management

Standard:

MM 8

REGIONAL CONTRACTOR has implemented and monitors the concurrent review process.

Citations: Contract #HP361008, RCPPM Ch 80; AMPM Chapter 1000, Policy 1030; 1040; 1050 & 1060 and 42 CFR 438.236 (a) (b) (c); CRSA Process Monitoring Tools: Concurrent Review

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR is using qualified, professional medical staff to conduct review (a physician, physician assistant, nurse practitioner and/or a RN/BSN) with appropriate training to apply CRS medical criteria or make medical decisions.

REGIONAL CONTRACTOR does have uniform review criteria for making hospital length of stay decisions

REGIONAL CONTRACTOR does (have a plan to) evaluate the consistency with which individuals involved in decision-making apply the standardized criteria.

REGIONAL CONTRACTOR does specify timeframes and frequency for conducting concurrent review and decisions.

REGIONAL CONTRACTOR does specify that a review of an admission (not prior authorized) will be conducted within 1 business day after notification. The extension of a continued stay shall be assigned a new review date each time a concurrent review occurs.

REGIONAL CONTRACTOR does have a process in place for medical review by another physician qualified when a length of stay or hospitalization is determined to exceed standard medical guidelines or there is no support for level of care or medical necessity.

REGIONAL CONTRACTOR does specify that all denials for continued services shall be signed by the CRS Regional Medical Director.

REGIONAL CONTRACTOR does have a process to notify the requesting provider and member of a decision to deny, limit or discontinue authorization of service and the steps for appealing a decision.

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Medical Management

REGIONAL CONTRACTOR does (have a process) take action when criteria are not being applied in a consistent manner.

Documents Reviewed

- CRS Yuma Concurrent Review Policy
- CRS Yuma Concurrent Review Form
- R.N. Licenses & confirmation of Medical Director's licensure & hospital privilege status
- YRMC Performance Management Plan CHS Nurse
- Utilization Management/Medical Management Power-point Training & sign in sheets 4/3/07 by CRS Yuma Compliance Officer
- McKesson Health Solutions LLC License agreement with Yuma Regional Medical Center including CRS Yuma
- YRMC/CRS Policy, procedure and forms Committee Guidelines
- Concurrent review Education sign in sheet

Comments:

CRSA review of CRS Yuma charts/forms documentation was found to confirm the consistent use of criteria for making hospital length of stay decisions through timely reviews during the stay. CRS Yuma staff received training from their compliance officer on peer to peer review & comparison of findings for concurrent & retrospective reviews; this is part of their Inter-rater reliability training. CRS Yuma concurrent review staff have also received training from ADHS during first quarter MM/UM site visit period on prior auth, concurrent and retro review processes and application. Yuma Regional Medical Center has recently signed an agreement with McKesson Health Solutions for training & tools to do inter-rater reliability for their staff.

Recommendations: None

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Medical Management

Standard:

MM 9

REGIONAL CONTRACTOR makes Inpatient concurrent review decisions in a timely manner.

Citations: Contract #HP361008, RCPPM Ch. 80; AMPM Chapter 1000; Policy 1030; 1040; 1050 & 1060 and 42 CFR 438.236 (a) (b) (c); CRSA Process Monitoring Tools: Concurrent Review

Rating: SUBSTANTIAL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does monitor and evaluate compliance with the established timelines for making the initial decision.

N/A In ___ of ___ (0%) files reviewed, Regional Contractor met /did not meet 1 business day timelines for concurrent review of admissions (not admission that did not have prior authorization)

In 11 of 13 (85%) concurrent reviews for 1 out of state admission, Regional Contractor documented a new review date each time a concurrent review occurred.

REGIONAL CONTRACTOR does implement corrective action interventions when established timelines are not met. (Not Rated)

Documents Reviewed:

CRS Yuma Concurrent Review Policy

CRS Yuma Concurrent Review Form

YRMC/CRS Policy, procedure and forms Committee Guidelines

R.N. Licenses & confirmation of Medical Director's licensure & hospital privilege status

YRMC Performance Management Plan CHS Nurse

Utilization Management/Medical Management Training 4/3/07 by CRS Yuma Compliance Officer

YRMC CRS Concurrent review education sign in sheet 4/9/07

McKesson Health Solutions LLC License agreement with Yuma Regional Medical Center including CRS Yuma

Patient's Concurrent review files

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Medical Management

Comments:

CRS Yuma had no hospital admissions that had not been prior authorized for time frame 7/1/06 to 3/31/07. CRS Yuma stayed in communication with the Children's Hospital in Boston to review & complete the concurrent review for one out-of-state service. CRS Yuma has no written plan to implement corrective action when established timelines are not met.

Recommendations:

CRS Yuma must develop a written plan to implement corrective action when established timelines are not met.

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Medical Management

Standard:

MM 9-A

REGIONAL CONTRACTOR has a process for effective retrospective review of the medical necessity post delivery of services.

Citations: Contract #HP361008, RCPM Ch 80; AMPM Chapter 1000; Policy 1020

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does have policies, procedures, and standard criterion that govern how retrospective review shall be conducted.

REGIONAL CONTRACTOR does have qualified staff that includes an Arizona-licensed nurse/nurse practitioner, or physician with appropriate training to apply CRS medical criteria or make medical decisions.

REGIONAL CONTRACTOR does have a system for maintaining files/documentation in a secured location.

REGIONAL CONTRACTOR does use a standardized criterion to make retro review decisions for medical necessity.

REGIONAL CONTRACTOR ensures retro review staff and CRS Regional Medical Director attend Inter-rater Reliability testing annually.

REGIONAL CONTRACTOR ensures retrospective reviews for all emergency services.

REGIONAL CONTRACTOR does utilize a retrospective review form containing essential elements to determine medical necessity for the emergency service.

- Determination of necessity of emergency service setting;
- CRS eligible diagnosis was relevant to emergency services;
- Services met the member's needs;
- Decisions on coverage and medical necessity are clearly document.

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CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Medical Management

Documents Reviewed:

CRS Yuma Retrospective Review Policy

CRS Yuma Retrospective Review Form

R.N. Licenses & confirmation of Medical Director's licensure & hospital privilege status

YRMC Performance Management Plan CHS Nurse

PowerPoint presentation & sign in sheets for Utilization Management/Medical Management Training 4/3/07 by CRS Yuma Compliance Officer

McKesson Health Solutions LLC License agreement with Yuma Regional Medical Center including CRS Yuma

Comments:

CRS Yuma Retrospective Review Form does not contain a place to document that services met the member's needs; CRS Yuma should revise the Retrospective Review Form to include a checkbox to document that services met the member's needs.

Recommendations: None

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Medical Management

Standard:

MM 10

REGIONAL CONTRACTOR promotes continuity and coordination through an ongoing source of primary care appropriate to his or her needs.

Citations: Contract #HP361008; AMPM Chapter 1000; 42 CFR 438.236 (a) (b) (c); 42 CFR 438.208; and 42 CFR 438.240

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does demonstrate care coordination with the primary payer in order to assure all medically necessary care is provided when CRS Regional Clinic denies coverage.

REGIONAL CONTRACTOR does have policies and procedures to address coordination of member care, including protection of member's privacy.

REGIONAL CONTRACTOR does identify that each member has an assigned PCP.
(100% of CRS Yuma Chart Review shows each member's PCP on the exterior chart label)

REGIONAL CONTRACTOR does coordinate care with PCPs as needed to support quality medical management and prevent duplication of services.

(91.5% of the records reviewed contained documentation that coordination of care with PCPs occurred as needed to support quality medical management and prevent duplication of services)

REGIONAL CONTRACTOR does ensure for Title XIX/XXI enrolled persons, notification, consultation with, or disclosure of the following information to the person's PCP:

- Coordinate the placement of persons in out-of-state treatment setting,
- Any other events requiring medical consultation with the person's PCP.

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Medical Management

(93.5% of the records reviewed contained documentation that for Title XIX/XXI enrolled persons care was coordinated with PCP when a member was placed in out-of-state treatment setting, transferred to other CRS regional sites, or aging out of CRS program)

REGIONAL CONTRACTOR does ensure its providers protect member's privacy when coordinating care with PCPs.

REGIONAL CONTRACTOR for Title XIX/XXI members does have an ETI form for members aging out from CRSA 60 days prior to their 21st birthday;
(100% (32) ETI forms (AHCCCS Exhibit 520-2) reviewed for members aging out from CRSA from July 1st 2006 to March 31st 2007)

Documents Reviewed:

CRS Yuma Prior Authorization Policy

CRS Yuma Transition of Care Policy

CRS Yuma Partial Transfer Policy

CRS Yuma Total Transfer Policy

CRS Yuma Telemedicine Transfer Policy

Yuma Regional Medical Center HIPPA Policies (covers CRS Yuma)

27 Selected Chart Reviews (Prior Auth, Concurrent Review, Retrospective Review, and Clinical Practice Guidelines)

1 Out-of-State Chart Review

14 Partial and Total Transfer Chart Review

32 ETI Forms for Aging-Out Members

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Medical Management

Comments:

Documentation of PCP notification is demonstrated in the chart with use of a stamp, use of cc. at the end of a consult report, and letters for aging-out members.

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Member Services

ADHS REVIEW TEAM: Judith Walker, Division Chief of Clinical Programs
Linda Hamman, Family/Youth Involvement Program Manager

CONTRACTOR STAFF: Sandra Thomas, Compliance Officer
Luz Valle, Business Operations Supervisor
Loraine Falto Toro, Clinical Supervisor
Pam Miller, Director

DATE OF REVIEW: April 24 - 25, 2007

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Member Services

Standard:

MS 1

All materials in the New Member Orientation Packet have been approved by ADHS/CRSA.

Citations: 42 CFR 438.10; ADHS/Regional Contractor Contract #HP361008; RCPM Chapter 80.500; CRSA New Member Orientation Policy

Rating:

Findings: FULL COMPLIANCE

All materials in the New Member Orientation Packet have been approved by CRSA.

REGIONAL CONTRACTOR does distribute New Member Orientation Packet to members within ten (10) days of enrollment.

The New Member Orientation Packet does include the current member handbook.

The New Member Orientation Packet does include a comprehensive listing of providers and their languages spoken.

Documents Reviewed:

Medical charts from 10 members

Psychosocial Assessment Profile

Treatment notes

Enrollment Form

CRS Yuma New Member Orientation Packet

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Member Services

Standard

MS 2

REGIONAL CONTRACTOR shall notify affected members on a timely basis (15 days) when a provider leaves the network.

Citations: 42 CFR 438.10; ADHS/Regional Contractor Contract #HP361008; RCPDM Chapter 80.500; CRSA New Member Orientation Policy

Rating: FULL COMPLIANCE

Findings:

The REGIONAL CONTRACTOR does notify affected members on a timely basis when a provider leaves the network.

Documents Reviewed:

Medical charts from 10 members

Psychosocial Assessment Profile

Treatment notes

Enrollment Form

CRS Yuma standard letter of notification

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Member Services

Standard

MS 3

REGIONAL CONTRACTOR ensures that it notifies affected members of significant program changes at least 30 days prior to the effective date of the change.

Citations: 42 CFR 438.10; ADHS/Regional Contractor Contract #HP361008

Rating: FULL COMPLIANCE

Findings:

The REGIONAL CONTRACTOR does notify affected members of a significant program change at least 30 days prior to the effective date of the change.

Documents Reviewed:

Medical charts from 10 members

Psychosocial Assessment Profile

Treatment notes

Enrollment Form

CRS Yuma standard letter of notification

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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Member Services

Standard:

MS 4

REGIONAL CONTRACTOR complies with federal and state requirements concerning advance directives for all members.

Citations: 42 CFR 438.6; 42 CFR 438.10; 42 CFR 417.436(d); 42 CFR 422.128; 42 CFR 489.100; ADHS/Regional Contractor Contract #HP361008, Task 44; RCPM Chapter 80.502

Ratings: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does maintain written policies and procedures for advance directives.

REGIONAL CONTRACTOR does document the member's decision about whether to develop (execute) an advance directive.

(100% of records documented the member's decision about whether to develop (execute) an advance directive)

REGIONAL CONTRACTOR does provide written information on advance directives to members (or the family member(s)/surrogate(s) at the time of enrollment.

(100% of records reviewed contained documentation that the member, family member or surrogate received written information on advanced directives)

REGIONAL CONTRACTOR does provide written information on advance directives to members (or the family member(s)/surrogate(s) if the is incapacitated) upon initial enrollment and upon request.

(100% of records reviewed contained documentation that the member, family member or surrogate received written information on advanced directives)

Documents Reviewed:

Medical charts from 10 members

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ADMINISTRATIVE REVIEW TOOL 2007**

Member Services

Psychosocial Assessment Profile, Treatment notes, Enrollment Form
CRS Yuma standard letter of notification, Advance Directives

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Member Services

Standard:

MS 5

The REGIONAL CONTRACTOR offers a comprehensive training function sufficient to provide identified trainings to all personnel and service providers.

Citations: ADHS/Regional Contractor Contract #HP361008, Task 9

Ratings: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does provide evidence of contracted training requirements.

REGIONAL CONTRACTOR does provide evidence of a process in place to identify additional trainings needed.

Documents Reviewed:

Cultural Competency Training

CRS Yuma Team Meetings agenda, attendance sheets, and minutes

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Network Sufficiency

ADHS REVIEW TEAM: Ashraf Lasee, Division Chief of Utilization and Medical Management
Kristy Benton, Utilization Management Specialist

CONTRACTOR STAFF: Sandra Thomas, Compliance Specialist
Luz Valle, Business Supervisor

DATE OF REVIEW: April 24 - 25, 2007

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Network Sufficiency

Standard

NS 1

REGIONAL CONTRACTOR effectively maintains and monitors the sufficiency of its provider network, which includes, but is not limited to, current and anticipated enrollment, current and anticipated utilization of services, number of network providers, number of network provider's not accepting new persons, and geographic location of providers.

Citations: 42 CFR 438.206(b) (1) (i) (ii) (iii) (iv) (v); ADHS/Regional Contractor Contract # HP 631008, Task 41; CRS Network Development and Management Plan; RCPDM Chapter 80

Rating: NON-COMPLIANCE

Findings

REGIONAL CONTRACTOR does not effectively address any material gaps or deficiencies in the network, including, but not limited to, as described in the annual Provider Network Development and Management Plan and/or the Quarterly Network Status reports.

REGIONAL CONTRACTOR does report anticipated changes to their network in a timely manner to CRSA.

REGIONAL CONTRACTOR does not monitor and effectively manage transitions necessitated by network changes to assure they occur in a manner that is least disruptive to the member.

Documents Reviewed

Current and anticipated enrollment

Current and anticipated utilization of services

Directory of contracted providers and physicians

Clinic Schedule 07/01/06-03/31/07

CRS Yuma Out of State Service policy

No-show report

No-show letter

Policy- maintaining a provider network

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Network Sufficiency

Comments

The monthly no-show report presents cancellation of clinics by providers on a frequent basis. CRS Yuma Provider Manual, under "Providers' Responsibility and Expectations" requests provider to notify CRS Yuma for any cancellation 24-hours in advance, which CRSA considers inadequate notification to inform members/families and reschedule appointments for timely delivery of services.

Recommendations: CRS Yuma must ensure that a clinic cancellation by providers must not affect the regularly scheduled clinic for that specialty. CRS Yuma must revise their Provider Manual and require adequate time for clinic cancellations from providers.

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Network Sufficiency

Standard

NS 2

REGIONAL CONTRACTOR ensures covered services are available and accessible to its eligible enrolled members receiving medical care; and provides for second opinion as necessary or requested.

Citations: CFR 438.206(b) (3); 42 CFR 438.206(b) (4) and (5); 42 CFR 438.206(c) (1) (iv-vi); ADHS/Regional Contractor Contract # HP 631008, Tasks 23 and 41

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does as necessary, or upon request, provide for a second opinion from a qualified health care professional who is an AHCCCS-registered provider (in or out-of-network).

REGIONAL CONTRACTOR does provide the second opinions free of charge to individuals receiving medical care.

Documents Reviewed

CRS Yuma Policy – Maintaining a provider network

CRS Yuma-Out-of-state Services policy

CRS Yuma Provider Manual

CRS Yuma Contract (Task 41-B)

CRS Yuma Partial Transfer Policy

Directory of contracted providers and physicians

Clinic Schedule 07/01/06-03/31/07

New members' referral log

Current members' referral log

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Network Sufficiency

Standard

NS 3

REGIONAL CONTRACTOR arranges for an out-of-network provider to provide a necessary service when it is unable to provide the service in an adequate and timely fashion through a network provider.

Citations: ADHS/Regional Contractor Contract # HP 631008, Tasks 41; RCPDM Chapter 80

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does arrange for an out-of-network provider to provide a necessary service that it is unable to provide in an adequate and timely fashion.

REGIONAL CONTRACTOR does ensure that out-of network providers coordinate payment with REGIONAL CONTRACTOR; ensuring costs to member are no greater than if services were furnished within the network.

Documents Reviewed:

CRS Yuma-Out-of-state Services policy

CRS Yuma Provider Manual

CRS Yuma Contract (Task 41-B)

CRS Yuma Partial Transfer Policy

CRSA Members' Handbook

Directory of contracted providers and physicians

Clinic Schedule 07/01/06-03/31/07

New members' referral log

Current members' referral log

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Network Sufficiency

Standard

NS 4

REGIONAL CONTRACTOR ensures that urgent pharmacy services are available to members during non CRS clinic hours.

Citations: 42 CFR 438.12; ADHS/Regional Contractor Contract # HP 631008, Task 27

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does provide pharmacy services available after hours, weekends and holidays.

Documents Reviewed:

CRS Yuma Policy Pharmaceuticals

Comments:

CRS Yuma was responsive in revising their pharmaceutical policy to include after hours and holiday coverage through Walgreen Pharmacies.

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Network Sufficiency

Standard

NS 5

REGIONAL CONTRACTOR maintains a non-discriminatory process for selection and retention of its providers.

Citations: 42 CFR 438.12; 438.214; 42 CFR 438.12(a) (1); ADHS/Regional Contractor Contract # HP 631008; RCPDM Chapter 80

Rating: FULL COMPLIANCE

Finding:

REGIONAL CONTRACTOR does effectively use written policies and procedures and all other available information to ensure the effective selection and retention of providers that includes:

- Nondiscrimination of providers that serve high-risk populations or specialize in conditions that require costly treatment,
- Exclusion of providers prohibited from participation in federal health care programs,
- Compliance with state requirements for credentialing and recredentialing.

Documents Reviewed

CRS Yuma Policy – Maintaining a Provider Network

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Network Sufficiency

Standard

NS 6

REGIONAL CONTRACTOR does not discriminate against providers in terms of participation, reimbursement, or indemnification based solely on licensure or certification and provides reason for declining to contract with a provider.

Citations: 42 CFR 438.12; ADHS/Regional Contractor Contract # HP 631008; RCPDM Chapter 80.

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does have policies and procedures prohibiting discrimination against providers in terms of participation, reimbursement, or indemnification based solely on licensure or certification.

REGIONAL CONTRACTOR does have policy and procedure to give providers written notice of its reason when declining to contract with individual providers or groups of providers.

Documents Reviewed:

CRS Yuma Policy – Maintaining a Provider Network

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Quality Management

CRSA REVIEW TEAM:

**Dr. Mike Clement, CRSA Medical Director
Stephen Burroughs, Division Chief for Quality Management
Allen Anna, Quality Management Specialist
Thara MacLaren, Research Analyst Manager
Cheryl Figgs, QM Coordinator
Marie Badr, QM Coordinator
Heather Dunn, PIP Coordinator**

CONTRACTOR STAFF:

**Luz Valle, Business Operations Supervisor
Lorraine Falto-Toro, Clinical Supervisor**

DATE OF REVIEW:

April 24 - 25, 2007

**ADHS/OC SHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Quality Management

Standard:

QM 1

REGIONAL CONTRACTOR is staffed with sufficient appropriately qualified personnel (i.e. social workers, audiologist, speech-language pathologists, orthotists, prosthetists, pharmacists, physical therapists, occupational therapists, and other ancillary personnel) to carry out the functions and responsibilities of the CRS program.

Citations: ADHS/ /Regional Contractor Contract #HP361008, Task 20; RCPM Chapter 10.206; AMPM Chapter 900 Policy 910.C.5

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR is JCAHO accredited during the review period.¹

- JCAHO certification lasts 3 years. Verify JCAHO certification through website at <http://www.qualitycheck.org/consumer/searchQCR.aspx>

REGIONAL CONTRACTOR does the sufficient staff of appropriately qualified personnel to carry out the functions and responsibilities specified in a timely and competent manner.

REGIONAL CONTRACTOR does have evidence to support the hiring of qualified and experienced professionals.

REGIONAL CONTRACTOR does document in the member's file supervision of licensed professionals when supervision is required by the license.

REGIONAL CONTRACTOR does have an organizational chart.

Documents Reviewed:

JCAHO certificate. Joint Commission ID#: 9518. The accreditation is effective March 11, 2006. The certificate and cycle are customarily valid for up to 39 months.

¹ If the regional CRS is accredited by JCAHO the standard is met and no additional findings necessitate review.

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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Quality Management

Comments:

Standard and findings are met. CRS Yuma is JCAHO accredited.

Recommendations: None

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Quality Management

Standard:

QM 2

REGIONAL CONTRACTOR'S Peer Review process is clearly defined.

Citations: AMPM Chapter 900, Policy 910.C.4

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does make providers aware of the peer review process.

REGIONAL CONTRACTOR does make providers aware of the peer review grievance/appeal procedure.

REGIONAL CONTRACTOR'S medical director or his/her designee does/does not participate in the CRSA peer review committee.

(NA - No peer review conducted during the review period)

REGIONAL CONTRACTOR does/does not implement recommendations made by CRSA's Peer Review Committee.

(NA - No peer review conducted during the review period)

Documents Reviewed:

CRS Yuma Orientation Provider Manual

Comments: None

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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Quality Management

Standard:

QM 3

REGIONAL CONTRACTOR maintains a health information system that reports and submits data as required by CRSA.

Citations: RCPM Chapter 50.208; AMPM Chapter 900, Policy 910.C.7, 940.2.a.2; 42 CFR 438.242

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does verify the accuracy and timeliness of reported data.

REGIONAL CONTRACTOR does screen the data for completeness, logic and consistency.

REGIONAL CONTRACTOR does collect service information in standardized formats to the extent feasible and appropriate.

REGIONAL CONTRACTOR'S Health Information System does include required demographic information (member's name, address, telephone number, AHCCCS identification number, CRSA identification number, gender, age, date of birth, marital status, next of kin, and if applicable, guardian or authorized representative).

REGIONAL CONTRACTOR'S Health Information System does include provider characteristics (provider identification number).

REGIONAL CONTRACTOR'S Health Information System does include services provided to recipients.

REGIONAL CONTRACTOR'S Health Information System does include other information necessary to guide the selection of, and meet the data requirements for PIPs and QM/PI oversight.

REGIONAL CONTRACTOR does ensure confidentiality of protected health information.

Documents Reviewed:

CRS Yuma's monthly Claim Accuracy/Data Integrity Reports
FY 07 Key Indicators - Data Management

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Quality Management

Comments:

CRS Yuma submits a monthly Claims Accuracy/Data Integrity Report. For the review period, CRS Yuma had a 99.77% accuracy rate. The total percentage of Encounters accepted by CRSA during the review period was 94.84%.

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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Quality Management

Standard:

QM 4

REGIONAL CONTRACTOR oversees and maintains accountability for all functions or responsibilities delegated to other entities.

Citations: RCPM Chapter 80.300; AMPM Chapter 910.A.1.h, 910.C.6, and 950.3; 42 CFR 438.230

Rating: NOT APPLICABLE

Findings:

REGIONAL CONTRACTOR does/does not have a written agreement that specifies activities and report responsibilities designated to the subcontractor.

REGIONAL CONTRACTOR does/does not ensure that a written agreement that provides for revoking delegation or imposing other remedies/sanctions if the subcontractor's performance is inadequate.

REGIONAL CONTRACTOR does/does not monitor the delegated entity on an ongoing basis and reviews them formally at least annually.

REGIONAL CONTRACTOR does/does not ensure that the subcontractor implements corrective action if any deficiencies are identified.

REGIONAL CONTRACTOR does/does not have evaluation reports and CAP documentation, as necessary, to ensure quality for all delegated activities.

Documents Reviewed:

CRS Yuma does not have any delegated services.

Comments: None

Recommendations: None

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CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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Quality Management

Standard:

QM 5

REGIONAL CONTRACTOR has a process for reviewing and evaluating quality of care complaints and allegations.

Citations: ADHS/Regional Contractor Contract #HP361008, Task 32; RCPPM Chapter 60.200 and 80.302; AMPM Chapter 900, Policy 910 and 960. 5; 42 CFR 438.240

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does ensure quality of care complaints received anywhere in the organization are referred to Quality Management for investigation and resolution.

REGIONAL CONTRACTOR does have a system in place for monitoring and oversight of the quality of care process.

Documents Reviewed:

1) Yuma Regional Medical Center, Category: Grievance and Appeals, Children's Rehabilitative Services, Title: Grievance Policy Number 2.01; 2) QOC and non- QOC concerns

Comments:

CRS Yuma should consider categorizing complaints only as QOC and non-QOC. CRS Yuma should consider removing the reference to formal and informal grievance in order to clarify the policy.

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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Quality Management

Standard:

QM 6

REGIONAL CONTRACTOR resolves quality of care/service issues communicated by enrolled member and contracted providers.
Citations: ADHS/Regional Contractor Contract #HP361008, Task 32; AMPM Chapter 910, 920, and 960; 42 CFR 438.214

Rating: SUBSTANTIAL COMPLIANCE

Findings:

REGIONAL CONTRACTOR has been found to be 92.7% percent compliant with AMPM requirements after review of 7 quality-of-care files.

REGIONAL CONTRACTOR has not developed an action plan to reduce/eliminate the likelihood of a complaint/abuse reoccurring.

REGIONAL CONTRACTOR does not communicate the resolution of the concern to the member/member's guardian.

REGIONAL CONTRACTOR has determined and implemented appropriate interventions.

REGIONAL CONTRACTOR does monitor the success of interventions developed as a result of recipient complaint/abuse issues.

REGIONAL CONTRACTOR does incorporate successful interventions into the QM program or assign new interventions/approaches when necessary.

Documents Reviewed:

1 QOC and 6 non-QOC concerns

Comments:

CRS Yuma clinic should consider manually entering the actual the case was opened rather than allowing the default entry in order to document accurately.

Recommendations:

CRS Yuma must send acknowledgement and closure letters to members or their guardians who express a potential QOC concern.
CRS Yuma clinic must list the "provider/entity" for each QOC and non-QOC case.

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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Quality Management

Standard:

QM 7

REGIONAL CONTRACTOR has a process in place for improving CRSA defined performance measures and continually improves its performance measure outcomes.

Citations: ADHS//Regional Contractor Contract #HP361008, Task 32; 42 CFR 438.240 (b)(2) and (c)

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does submit accurate performance measurement data to enable them to measure REGIONAL CONTRACTOR's performance (below 85% accuracy results in non-compliance).²

REGIONAL CONTRACTOR does meet the minimum performance levels.

REGIONAL CONTRACTOR does submit timely performance measurement data to enable CRSA to measure REGIONAL CONTRACTOR's performance (below 90% in timeliness results in non-compliance).

REGIONAL CONTRACTOR does develop and implement corrective actions to improve performance.

Documents Reviewed:

Performance Improvement Charts/Results July 1, 2006 to March 31, 2007.

30 Medical Records reviewed

Comments:

CRS Yuma had a 90.7% accuracy of performance measure data.

² If regional contractor does not meet the accuracy standard then the regional contractor automatically does not meet the next standard on minimum performance levels.

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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Quality Management

Performance Standards July 1, 2006 to March 31, 2007

10 Day Performance Measure (Preliminary Eligibility):	98.1%
10 Day Performance Measure (Preliminary Ineligibility):	86.4%
10 Day Performance Measure (Incomplete Referral Form):	75.0%
30 Day Performance Measure (Timeliness of Initial Evaluation):	92.6%
45 Day Performance Measure (First Appointment with CRS Specialty Provider):	89.1%

Recommendations: None

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
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Quality Management

Standard:

QM 8

REGIONAL CONTRACTOR participates and supports all CRSA Performance Improvement Projects that focus on clinical and non-clinical areas.

Citations: ADHS/ Regional Contractor Contract, Task 32; RCPPI Chapter 60.200 and 80.300; 42 CFR 438.240(b)(1) and (d)

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does implement system interventions to achieve improvement in quality.

REGIONAL CONTRACTOR does initiate activities for increasing or sustaining improvement.

REGIONAL CONTRACTOR does participate in PIP activities.

REGIONAL CONTRACTOR does have assigned PIP Coordinator/Lead.

REGIONAL CONTRACTOR does provide timely and accurate performance improvement data/records as requested per CRSA.

Documents Reviewed:

Nursing Policy # 9.22, No-Show, Social Services Policy # 10.13, Pediatric to Adult Transition Services, Non-Utilization PIP Meeting Minutes

Comments:

CRS Yuma has demonstrated compliance with all items, and has met performance goals for the main indicators on both active Performance Improvement Projects. Staffs has responded promptly to all requests and have actively participated in meetings and trainings.

Recommendations: None

**ADHS/OC SHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Quality Management

Standard:

QM 9

REGIONAL CONTRACTOR'S medical board reviews all credentialing/re-credentialing and provisional credentialing policies.
Citations: ADHS/Regional Contractor Contract #HP361008, Task 32; AMPM Chapter 900.950; 42 CFR 438.214

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR is JCAHO accredited during the review period.³

- JCAHO certification lasts 3 years. Verify JCAHO certification through website at <http://www.qualitycheck.org/consumer/searchQCR.aspx>

REGIONAL CONTRACTOR does have a credentialing process that is defined to meet the CRSA and AHCCCS requirements.

REGIONAL CONTRACTOR does have a process for granting, renewing, or revising setting-specific clinical privileges.

REGIONAL CONTRACTOR does identify the Medical Director or designated physician as being responsible for oversight of the credentialing and re-credentialing and provisional decisions.

REGIONAL CONTRACTOR does identify the role of the credentialing committee.

Documents Reviewed:

JCAHO certificate. Joint Commission ID#: 9518. The accreditation is effective March 11, 2006. The certificate and cycle are customarily valid for up to 39 months.

Comments:

CRS Yuma is JCAHO accredited.

Recommendations: None.

³ If the regional CRS is accredited by JCAHO the standard is met and no additional findings necessitate review.

**ADHS/OC SHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Quality Management

Standard:

QM 10

REGIONAL CONTRACTOR must ensure implementation of credentialing, re-credentialing and provisional credentialing of the providers in its subcontractors' provider network.

Citations: ADHSA/Regional Contractor Contract #HP361008, Task 32; AMPM Chapter 900. 950; 42 CFR 438.214

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR is JCAHO accredited during the review period.⁴

- JCAHO certification lasts 3 years. Verify JCAHO certification through website at <http://www.qualitycheck.org/consumer/searchQCR.aspx>

REGIONAL CONTRACTOR has been found to be compliant with the AMPM credentialing/re-credentialing requirements.

REGIONAL CONTRACTOR does appropriately credential its providers with which it contracts.

REGIONAL CONTRACTOR does meet all of the re-credentialing requirements.

REGIONAL CONTRACTOR does have an appeals process and a mechanism to inform the provider of the appeals process.

Documents Reviewed:

JCAHO certificate. Joint Commission ID#: 9518. The accreditation is effective March 11, 2006. The certificate and cycle are customarily valid for up to 39 months.

Comments:

CRS Yuma is JCAHO accredited.

Recommendations: None.

⁴ If the regional CRS is accredited by JCAHO the standard is met and no additional findings necessitate review.

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Quality Management

Standard:

QM 11

REGIONAL CONTRACTOR meets delivery dates for medical eligibility denials and care coordination upon first visit.

Citations: ADHS/Regional Contractor Contract #HP361008, Task 6, Task 11; RCPPM Chapter 20.401, 20.403, 80.407

Rating: PARTIAL COMPLIANCE

Findings:

REGIONAL CONTRACTOR does send a consultation report to the referring physician and health plan/program contractor within 30 days of the first clinic visit.

(95.2% of the consultation reports were sent to the referring physician and health plan/program contractor within 30 days of the first clinic visit).

REGIONAL CONTRACTOR does have a determination process for members participating in the CRS programs including a process for the 10 working day approval notice to the referring physician and health/plan program contractor.

(100.0% of the approval notices to the referring physician and health/plan program contractor were sent within 10 working days).

REGIONAL CONTRACTOR does not have a determination process for members participating in the CRS programs including a process for the 5 working day denial notification to the health plan/program contractors and providers.

(55.6% of the denial notification letters were sent to the health plan/program contractors and providers within 5 days).

Documents Reviewed:

30 Medical Records reviewed

Comments:

2 medical records did not meet the 5 working day denial notification; 1 medical record did not have the denial notification letter copied to the health/program contractor and provider; 1 medical record did not have both (5 working day denial notification and copy to health/program contractor and provider).

**ADHS/OCSHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Quality Management

Recommendations:

CRS Yuma must ensure eligibility denial notifications are sent to the referring physician and health plan within 5 working days of denial determination.

**ADHS/OC SHCN
CHILDREN'S REHABILITATIVE SERVICES ADMINISTRATION
ADMINISTRATIVE REVIEW TOOL 2007**

Quality Management

Standard:

QM 12

REGIONAL CONTRACTOR has implemented a process to ensure that medical records are accurate, current, and confidential.
Citations: RCPM Chapter 70.101; AMPM Chapter 940

Rating: FULL COMPLIANCE

Findings:

REGIONAL CONTRACTOR is JCAHO accredited during the review period.⁵

- JCAHO certification lasts 3 years. Verify JCAHO certification through website at <http://www.qualitycheck.org/consumer/searchQCR.aspx>

REGIONAL CONTRACTOR does have a process to ensure the organization and its providers have information required for:

- Effective and continuous patient care through accurate medical record documentation of each member's health status, changes in health status, health care needs, and health care services provided,
- Quality review, and
- The conduct of an ongoing program to monitor compliance with those policies and procedures.

REGIONAL CONTRACTOR has implemented a process to ensure a complete, accurate, and timely medical record.

REGIONAL CONTRACTOR does have a process to ensure confidentiality of protected health information.

Documents Reviewed:

JCAHO certificate. Joint Commission ID#: 9518. The accreditation is effective March 11, 2006.

Comments:

CRS Yuma is JCAHO accredited.

Recommendations: None

⁵ If the regional CRS is accredited by JCAHO the standard is met and no additional findings necessitate review.